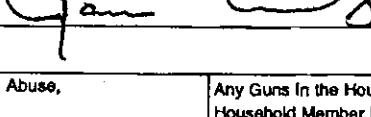
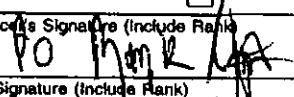
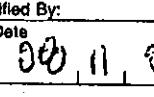


RAMAPO		NY 04353	DOMESTIC INCIDENT REPORT (PRINT UPPER CASE)		04-35503		
Date of Report	Time of Report	Date of Occur	Time of Occur	Document #	Filed 10/10/2008 Page 1 of 50		
08, 11, 08	2041	08, 11, 08	2041	14 MADISON HILL RD AIRMONT NY 10401	02 Sector 02 Beat		
Compl/Victim's Last Name, First, M.I.		Address 14 MADISON HILL RD AIRMONT NY 10401				Sex M	
CURLEY, JAMES							
Date of Birth	Age	Home Telephone	Race	White <input checked="" type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Indian <input type="checkbox"/> Asian <input type="checkbox"/> Unk <input type="checkbox"/>	Ethnic Origin Hispanic <input type="checkbox"/> Non-Hispanic <input checked="" type="checkbox"/> Unknown <input type="checkbox"/>	+ +	
01, 22, 64	38	360-0241					
Suspect/Other Party Last Name, First, M.I.		Address 14 MADISON HILL RD AIRMONT NY 10401				Sex F	
CURLEY, LINDA							
Date of Birth	Age	Home Telephone	Race	White <input checked="" type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Indian <input type="checkbox"/> Asian <input type="checkbox"/> Unk <input type="checkbox"/>	Ethnic Origin Hispanic <input type="checkbox"/> Non-Hispanic <input checked="" type="checkbox"/> Unknown <input type="checkbox"/>		
01, 23, 48	38	270-9705					
Suspect Relationship to the Complainant/Victim		Suspect Present?	Offense/Incident Involved:		Description (Offenses) DISPUTE		
WIFE HUSBAND		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Fel <input type="checkbox"/> Misd <input type="checkbox"/> Vio <input checked="" type="checkbox"/> Other				
Order of Protection? Violated?	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Issuing Court FAMILY	OP Registry Checked <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Expir. Date	Complaint Report Prepared? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Compl. No. — Report Received <input type="checkbox"/> Walk-in <input checked="" type="checkbox"/> Radio Run	
Suspect Used/Threatened Weapons? Type:	Victim Injured?	Describe	Aided No. —	Removed to Hospital?	What Hospital? —		
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
Photos Taken? Arrest Made?	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Non Arrest Reason	If Arrest Made, Did Perp. Resist? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input checked="" type="checkbox"/> No Offense Committed <input type="checkbox"/> Not at Scene <input type="checkbox"/> Warrant Requested <input type="checkbox"/> Other					
Charge(s) (List All) NONE		Arrest No. —					
Family/Household Members Present? If YES, Last Name, First <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO JAMES CURLEY COURNEY CURLEY		Date of Birth 09-06-05	Relationship SON DAUGHTER				
Domestic Incident Report Receipt Issued? If NO, Reason: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO AWAITING SUPERVISOR APPROVAL		DV Notice Issued to Victim <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Date 09-11-08				
Suspect's Actions: <input type="checkbox"/> Biting <input type="checkbox"/> Choking <input type="checkbox"/> Destroying Property <input type="checkbox"/> Forcible Restraint <input type="checkbox"/> Grabbing <input type="checkbox"/> Hair Pulling <input type="checkbox"/> Homicide <input type="checkbox"/> Injury to Child <input type="checkbox"/> Kicking <input type="checkbox"/> Pulling Phones From Wall <input type="checkbox"/> Punching <input type="checkbox"/> Pushing <input type="checkbox"/> Pushing/Slamming Into Walls <input type="checkbox"/> Sexual Abuse <input type="checkbox"/> Slapping <input type="checkbox"/> Threats With Weapon(s) <input type="checkbox"/> Throwing Items <input type="checkbox"/> Using Weapon(s) <input type="checkbox"/> Verbal Abuse <input checked="" type="checkbox"/> Other: DOMESTIC DISAGREEMENT							
Narrative of the Incident: (include results of investigation and basis for action taken)							
<p>At approx 8:50 pm my wife Linda came home and informed the children she had just advised me she is taking the children and would not tell me where they were going. I then called 911 when she made accusations telling me that she told the P.D.O. about my family members in illegal activities. She also told me that my sister in law Mary was saying mr for accusations I made again her wife the Bank. I informed her that I was contacting O.F.B. about her calling in her own prescription without being a patient of Dr. Goldberg or Dr. Hussain.</p>							
Victim's Statement of Allegations:		<p>My wife Linda came home and informed the children she had just advised me she is taking the children and would not tell me where they were going. I then called 911 when she made accusations telling me that she told the P.D.O. about my family members in illegal activities. She also told me that my sister in law Mary was saying mr for accusations I made again her wife the Bank. I informed her that I was contacting O.F.B. about her calling in her own prescription without being a patient of Dr. Goldberg or Dr. Hussain.</p>					
False Statements made herein are punishable as a Class A Misdemeanor, pursuant to Section 210.45 of the Penal Law.		Victim's Signature 		Date 08-11-08			
Other involved Agency(s)							
Is There Reasonable Cause to Suspect A Child May Be The Victim of Abuse, Neglect or Maltreatment? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		Any Guns In the House? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		Any Guns Seized? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
If Yes, Reporting Officer Must Contact the NYS Child Abuse Hotline Registry # 1-800-635-1522		Household Member Have a Pistol Permit? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Permit Seized? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			
REFERRALS: <input type="checkbox"/> Child Protective Services <input type="checkbox"/> Licensing Bureau <input type="checkbox"/> Adult Protective Services		Name of Person Notified: _____					
<input type="checkbox"/> Domestic Violence Services <input type="checkbox"/> Other Outside Agency		Name of Person Notified: _____					
Reporting Officer's Signature (Include Rank) 				Date: 08-11-08	Time: 455	Notified By: 	Date: 08-11-08
Supervisor's Signature (Include Rank) 				Date: 08-11-08	Page 1 of 50		

5. Date

08/17/08

6. Time of Report

2043

7. Complainant Name

CURLEY, JAMES

8.

DOMESTIC

9. Narrative

MR. CURLEY REPORTS THAT HIS WIFE LINDA TOOK THEIR DAUGHTER AND LEFT THEIR RESIDENCE AND WOULD NOT TELL HIM WHERE SHE WAS GOING. MR. CURLEY STATES HE BELIEVES THAT HIS WIFE IS UPSET AND HIS CONCERN IS FOR HIS DAUGHTER COURTNEY'S SAFETY. MR. CURLEY WAS REMINDED THAT HIS WIFE CAN TAKE HER DAUGHTER WITH HER AND THERE IS NO COURT ORDER STATING OTHERWISE, TO WHICH MR. CURLEY STATES HE REALIZES. REPORTING OFFICER HAS MADE ATTEMPTS TO CONTACT MS CURLEY VIA CELL PHONE TO VERIFY EVERYONE'S WELL BEING BUT HAS ONLY BEEN ABLE TO LEAVE A MESSAGE. MR CURLEY WAS ADVISED HE WOULD BE INFORMED OF HIS DAUGHTERS CONDITION PROVIDED REPORTING OFFICER MAKES CONTACT WITH MS CURLEY.

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12
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Total

ADMINISTRATIVE

10. Inquiries (Check all that apply)

- DMV Want/Warrant
 Crim. History Stolen Property Scofflaw
 Other

11 NYSPIN Message No.

12.

13.

Page

Page

Page

13. Reporting Officer Signature (Include Rank)

14. ID No.

455

15. Supervisor's Signature (Include Rank)

16. ID No.

17.

Page

Page

Page

17. Case Status

- Open Closed (If Closed, check box below) Unfounded
 Vict. Refused to Coop. Arrest Prob. Declined Warrant Advised
 CSI Juv. - No Custody Arrest-Juv. Offender Dead
 Unknown

18. Status Date

Mo Day Year

19. Notified/TOT

Mo Day Year

A

use cover sheet

On 08/11/06 at about 2043HRS. I Responded to 14 Madison Hill Rd. re/ a custody dispute. I arrived on the scene with PO Smith and PO Dale. Upon arrival we spoke with James Curley who was home with his child, James Jr. James Curley stated that he and his wife Linda both have custody of their two children, son James and daughter Courtney. James Curley stated that while he was bathing James Jr., Linda took Courtney and left the house. He said that he did not know where Linda Curley was going. He said that he was concerned because Linda seemed to be upset.

James Curley stated that Linda Curley did not violate the Order of Protection that he has against her.

I advised James Curley that I could have an officer attempt to contact Linda Curley only to make sure that she and Courtney were alright. I advised James Curley that if we made contact with Linda we could not compel her to return home with Courtney. I further advised James Curley that if we did locate Linda Curley, we would not divulge her location to him. We would only make sure that she and Courtney were alright.

James Curley showed me the Order of Protection that he has against Linda Curley. He again stated that Linda Curley did not violate it.

Upon completion, PO Smith, PO Dale and I cleared from the scene.

At about 2115HRS. I called Capt. Brower (Staff Duty Officer) via telephone from Ramapo Police Headquarters. I advised him of this incident.

10. Inquiries (Check all that apply)	11. NYSPIN Message No.	12.	82. Page of Pages
<input type="checkbox"/> DMV <input type="checkbox"/> Want/Warrant <input type="checkbox"/> Scofflaw <input type="checkbox"/> Crim. History <input type="checkbox"/> Stolen Property <input type="checkbox"/> Other			
12. Reporting Officer Signature (Include Rank) Sgt. Brian Corbett	14. ID No. 324	15. Supervisor's Signature (Include Rank)	16. ID No.
17. Case Status <input type="checkbox"/> Open <input type="checkbox"/> Closed (If closed, check box below) <input type="checkbox"/> Vict. Refused to Coop. <input type="checkbox"/> Arrest <input type="checkbox"/> Pros. Declined <input type="checkbox"/> Warrant Advised <input type="checkbox"/> CBI <input type="checkbox"/> Juv.-No Custody <input type="checkbox"/> Offender Dead <input type="checkbox"/> Extrad. Declin <input type="checkbox"/> Unknown	18. Status Date 8/11/06	19. Notified/TOT	

Date
1/11/066. Time of Report
2043

Case 7:08-cr-00404-SCR

7. Complainant Name
CURLEY JAMES

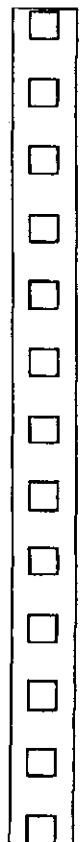
Document 2-7

Filed 10/10/2008

8.

Page 4 of 50

RESPONDED TO #14 MADISON HILL DR. IN REFERENCE TO THE ABOVE INCIDENT; I STOOD BY THE SCENE WHILE PAPERWORK WAS BEING COMPLETED. JAMES CURLEY STATED IN MY PRESENCE THAT THERE WERE NO VIOLATIONS THAT OCCURRED DURING THE INCIDENT. NOTHING FURTHER.



10. Inquiries (Check all that apply)

- DMV Want/Warrant Scofflaw
 Crim. History Stolen Property Other

11. NYSPIN Message No.

12.

12. Reporting Officer Signature (Include Rank)

14. ID No.

431

15. Supervisor's Signature (Include Rank)

16. ID No.

82.

Page
of Pages17. Case Status Open Closed (If closed, check box below)

- Vict. Refused to Coop.
 CBI Juv.-No Custody

 Arrest Pros. Declined Unfounded

- Offender Dead Warrant Advised
 Extrad. Declin Unknown

18. Status Date

19. Notified/TOT

RESPONDED TO #14 MADISON HILL DR. IN REFERENCE TO THE ABOVE INCIDENT; I WAS CLEARED FROM THE SCENE BY SGT. CORBETT UPON ARRIVAL. NOTHING FURTHER.

10. Inquiries (Check all that apply)		11. NYSPIN Message No.	12.	82.
<input type="checkbox"/> DMV	<input checked="" type="checkbox"/> Warrant	<input type="checkbox"/> Scofflaw		
<input type="checkbox"/> Crim. History	<input checked="" type="checkbox"/> Stolen Property	<input type="checkbox"/> Other		
12. Reporting Officer Signature (Include Rank)		14. ID No.	15. Supervisor's Signature (Include Rank)	16. ID No.
		448	54-11	309
17 Case Status		<input type="checkbox"/> Open	<input type="checkbox"/> Closed (If closed, check box below)	<input type="checkbox"/> Unfounded
<input type="checkbox"/> Vict. Refused to Coop.		<input type="checkbox"/> Arrest	<input type="checkbox"/> Pros. Declined	<input type="checkbox"/> Warrant Advised
<input type="checkbox"/> CBI		<input type="checkbox"/> Offender Dead	<input type="checkbox"/> Extrad. Declin	<input type="checkbox"/> Unknown
			18. Status Date	19. Notified/TOT
			06/11/05	
				Page _____ of Pages _____

)CJS-3208 (1/92)

000155

(PRINT UPPER CASE)				06-33906	
Date of Fr	Time of Report	Date of Occur	Time of Occur	Address of Occurrence	
R 1-106	Case 7:08-cr-00404 SCR	Document 12-7	Filed 10/10/2008	Page 6 of 50	
Con/pl./Victim's Last Name, First, M.I.	Address			Ap'l No. Sector Beat	
Curley, L. n.d., J	Same As Above			F	
Date of Birth	Age	Home Telephone	Race	Ethnic Origin	
7-23-1968	38	845-368-8641	<input checked="" type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Indian <input type="checkbox"/> Asian <input type="checkbox"/> Unk	<input type="checkbox"/> Hispanic <input checked="" type="checkbox"/> Non-Hispanic <input type="checkbox"/> Unknown	
Suspect/Other Party Last Name, First, M.I.		Address			Sex
Curley, James		Same As Above			M
Date of Birth	Age	Home Telephone	Race	Ethnic Origin	
4-26-1964	42	845-368-8641	<input checked="" type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Indian <input type="checkbox"/> Asian <input type="checkbox"/> Unk	<input type="checkbox"/> Hispanic <input checked="" type="checkbox"/> Non-Hispanic <input type="checkbox"/> Unknown	+
Suspect Relationship to the Complainant/Victim		Suspect Present?	Offense/Incident Involved:	Description (Offenses)	
Husband		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> Fel <input type="checkbox"/> Misd <input type="checkbox"/> Viol <input type="checkbox"/> Other	Verbal Dispute	
Order of Protection?	Violated?	Issuing Court	OP Registry Checked	Expir. Date	Complaint Report Prepared?
<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Family Court	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	10-11-06	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Suspect Used/Threatened Weapons? Type:		Victim Injured?	Describe	Aided No.	Removed to Hospital?
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Photos Taken?	Arrest Made?	Non Arrest Reason			If Arrest Made, Did Perp. Resist?
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input checked="" type="checkbox"/> No Offense Committed <input type="checkbox"/> Not at Scene <input type="checkbox"/> Warrant Requested <input checked="" type="checkbox"/> Other			<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
Charge(s) (List All)					Arrest No.
None					-
Family/Household Members Present? If YES, Last Name, First					Date of Birth
<input type="checkbox"/> YES <input type="checkbox"/> NO Courtney Lynn, Curley					4/17/02
James, Curley					8-2-05
Relationship					Son
Domestic Incident Report Receipt Issued? If NO, Reason:		DV Notice Issued to Victim	Date		
<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Pending Supervisor's Approval		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	8-14-2006		
Suspect's Actions: <input type="checkbox"/> Biting <input type="checkbox"/> Choking <input type="checkbox"/> Destroying Property <input type="checkbox"/> Forceable Restraint <input type="checkbox"/> Grabbing <input type="checkbox"/> Hair Pulling <input type="checkbox"/> Homicide <input type="checkbox"/> Injury to Child <input type="checkbox"/> Kicking <input type="checkbox"/> Pulling Phones From Wall <input type="checkbox"/> Punching <input type="checkbox"/> Pushing <input type="checkbox"/> Pushing/Slamming Into Walls <input type="checkbox"/> Sexual Abuse <input type="checkbox"/> Slapping <input type="checkbox"/> Threats With Weapon(s) <input type="checkbox"/> Throwing Items <input type="checkbox"/> Using Weapon(s) <input type="checkbox"/> Verbal Abuse <input checked="" type="checkbox"/> Other: Following and arguing					
Narrative of the Incident: (include results of investigation and basis for action taken) SEE Scapp					
Victim's Statement of Allegations: Jimmy started arguing about who's dropping picking the kids up from daycare, changing his mind about it. Then he started following me around with a tape recorder saying harrassing things & about me working, my employers there, my family. His behavior was odd and I felt threatened, called 911 & went outside to wait with my children.					
False Statements made herein are punishable as a Class A Misdemeanor, pursuant to Section 210.45 of the Penal Law.		Victim's Signature	Date		
Other Involved Agency(s)		Rinda Curley 8-14-06			
Is There Reasonable Cause to Suspect A Child May Be The Victim of Abuse, Neglect or Maltreatment? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO			Any Guns in the House? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Household Member Have a Pistol Permit? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Permit Seized? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO Permit No. _____ Name _____		
If Yes, Reporting Officer Must Contact the NYS Child Abuse Hotline Registry # 1-800-835-1522.					
REFERRALS: <input type="checkbox"/> Child Protective Services <input type="checkbox"/> Licensing Bureau <input type="checkbox"/> Adult Protective Services Name of Person Notified: <input type="checkbox"/> Domestic Violence Services <input type="checkbox"/> Other Outside Agency Date: Time: Notified By:					
Reporting Officer's Signature (Include Rank)				Officer I.D. No.	Date
Supervisor's Signature (Include Rank)				Date	Page of Pages
Signature				8-14-06	1

White Copy - Agency Pink Copy - Victim
Canary Copy - DCJS Goldenrod Copy - Victim

5. Date

6. Time of Report

7. Complainant Name

Case 7:08-cr-00404 SCR Document 127 Filed 10/10/2008 Page 7 of 30

8/14/08 0752

Curley, Linda J

Domestic

9. Narrative

At approx 8 AM I walked downstairs and was helping my daughter Courtney get her walkin out of her car. My wife came downstairs and stated I Read what you want, Dr. Hussain and myself will get you and kill you I said nothing we went to get the money my wife had left from (House) and called and said I was harassing her. I did not say anything to my wife, but asked who was taking and picking up from daycare. She was dropping off and said she was working late again.

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Total

ADMINISTRATIVE

10. Inquiries (Check all that apply)
 DMV Warrant/Merit
 Crim. History Stolen Property

Scofflaw
 Other

11 NYSPIN Message No

12.

13. Supervisor's Signature (Include Rank)

14. ID No.

15.

Page

1 of

Pages

16. Reporting Officer Signature (Include Rank)

17. ID No.

18. ID No.

A

Last cover sheet

17. Case Status Open Closed (If Closed, check box below) Unfounded
 Vict. Refused to Coop. Arrest Pros. Declined Warrant Advised
 CBI Juv. - No Custody Arrest-Juv. Offender Dead Extrad. Declin. Unknown

18. Status Date
 8 Mo 12 Day 10 Year

19. Notified/TOT

5. Date

6. Time of Report

8/14/06

752

7. Complainant Name

Curley, Linda

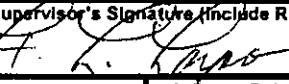
8.

Domestic

On the above date and time I was dispatched to the above location in reference to a husband and wife domestic. Upon arrival I observed Mrs. Linda Curley standing at the end of her driveway with her two children, and Mr. James Curley standing at the front of the residence. I spoke with Mrs. Curley who stated that her husband James had started arguing about who was going to be taking the kids to and from daycare. She said he kept changing his mind about what he wanted to do. Then he started to follow her around the house with a tape recorder saying harassing things about her working, her employer and then her family. She further stated that he was acting odd and that she felt threatened, so she called the police and waited outside with the kids until I arrived.

I spoke with Mr. Curley who reports that while he was getting his daughter ready for daycare, his wife approached him and stated "I read what you wrote; Dr. Hussain and I will get you and kill you". Mr. Curley showed me some legal papers that he had left out, in preparation for court. I observed a number of papers that were on the floor of what appeared to be one of the children's bed rooms. He said that his wife had read some of the notes he had made in reference to her brother. He said that her brother had molested his own daughter and that's what some notations his wife read were about. He said that both he and his wife were due in court this morning at 0930 hours. He further said that he did not say anything to his wife other than the conversations they had in reference to who was going to be dropping off and picking up the kids. He said that she was dropping off and she said that she was working late again.

I spoke with both parties in reference to signing charges; they both did not wish to sign any charges at this time. They both wanted to make separate statements, Mr. Curley's statement was written on a supplemental report form and attached to the domestic form.

10. Inquiries (Check all that apply)				11. NYSPIN Message No.	12.		82 P Page 3 of Pages
<input type="checkbox"/> DMV <input type="checkbox"/> Want/Warrant <input type="checkbox"/> Scofflaw <input type="checkbox"/> Crim. History <input type="checkbox"/> Stolen Property <input type="checkbox"/> Other							
12. Reporting Officer Signature (Include Rank)				14. ID No.	15. Supervisor's Signature (Include Rank)		16. ID No.
				466			P23
17 Case Status <input type="checkbox"/> Open <input type="checkbox"/> Closed (if closed, check box below) <input type="checkbox"/> Vict. Refused to Coop. <input type="checkbox"/> Arrest <input type="checkbox"/> Pros. Declined <input type="checkbox"/> Unfounded <input type="checkbox"/> CBI <input type="checkbox"/> Juv.-No Custody <input type="checkbox"/> Offender Dead <input type="checkbox"/> Warrant Advised <input type="checkbox"/> Unknown				19. Status Date		19. Notified/TOT	
				8/14/06			

5. Date

6. Time of Report

8/14/06

752

7. Complainant Name

Curley, Linda

8.

Domestic Disturbance

PO Plesko and I responded to 14 Madison Hill Rd. for a reported domestic disturbance. Upon arrival I turned on the transmitter to car 423. It remained on for the duration of this call.

Both parties were calm. I interviewed both Mr. and Mrs. Curley separately. They both stated they have court today. Mrs. Curley was upset because her husband was walking around with a tape recorder and recording audio notes.

Mr. Curley states he was recording notes when he mistakenly left some papers on a table.. His wife read the notes and became upset. He states she threatened to kill him and it should be on tape. He did not wish to sign charges.

Mrs. Curley states she too had her audio recorder on during this incident.

Both parties stated they called the police to report this incident. I confirmed this through dispatch. Mrs. Curley phoned and shortly after Mr. Curley phoned.

10. Inquiries (Check all that apply)				11. NYSPIN Message No.	12.	82.		
<input type="checkbox"/> DMV <input type="checkbox"/> Want/Warrant <input checked="" type="checkbox"/> Scofflaw <input type="checkbox"/> Crim. History <input type="checkbox"/> Stolen Property <input type="checkbox"/> Other								
12. Reporting Officer Signature (Include Rank)				14. ID No.	15. Supervisor's Signature (Include Rank)	16. ID No.		
<u>Sgt. Robert Lancia</u>				425	<u>X. Hall</u>	925		
17. Case Status		<input checked="" type="checkbox"/> Open	<input type="checkbox"/> Closed (If closed, check box below)	<input type="checkbox"/> Arrest	<input type="checkbox"/> Pros. Declined	<input type="checkbox"/> Warrant Advised	18. Status Date	19. Notified/TOT
<input type="checkbox"/> Vict. Refused to Coop. <input type="checkbox"/> CBI			<input type="checkbox"/> Offender Dead <input type="checkbox"/> Extrad. Declin	<input type="checkbox"/> Unknown			8/14/06	

Town of Ramapo
 237 Route 59 Suffern, NY 10901
 phone: (845) 357-5100
 fax: (845) 357-8513

TOWN OF RAMAPO
 POLICE DEPARTMENT

2006 NOV 16 P 12:46

APPLICATION FOR PUBLIC ACCESS TO TOWN RECORDS

Records Access Officer: Christian G. Sampson, Town Clerk.
 TOWN RECORDS ARE OPEN FOR INSPECTION MONDAY - FRIDAY 9AM TO 5PM.

I HEREBY APPLY TO INSPECT THE FOLLOWING TOWN RECORD(S):
All reports made by Linda Curley to Ramapo Police Dept.

from July to present, Some Dates include 1/9/06, 5/14/06, 8/21/06, + more

Linda Curley

(PRINT) Name of Person

14 Madison Hill Rd

Address

Suffern NY 10901

City/State/Zip

Chris Clark

Signature

845-553-0760

Daytime Phone

11/16/06

Date of Request

2 NOV 16
TOWN OF RAMAPO POLICE DEPARTMENT
NY 10901
11/16/06
12:46
33

Date Called _____ Comments _____

THERE IS A CHARGE OF \$.25 PER COPIED PAGE allowed by law.

FOR TOWN USE ONLY

Request Approved No Charge for Record Charge

Request Denied for the Reason(s) Below:

Confidential Disclosure Certification Fee: (

Part of Investigatory Files Photocopy Fee: (

Unwarranted Invasion of Personal Privacy

Record Not Located Total to be paid: (

Record Not Maintained by this Agency

Would impair contract awards/collective bargaining agreements

Trade secret, confidential commercial information

Law enforcement records

Exempted by Statute other than the Freedom of Information Act

Other (Specify) _____

Signature of Town Rep.

Title

Date

NOTICE: Any person denied access to records may appeal the denial within 30 days of the denial. Such appeals should be addressed to the Supervisor of the Town of Ramapo, 237 Route 59, Suffern, NY 10901.

I HEREBY APPEAL:

Signature : _____

Date: _____

CTA 11.17.2006

000160

TOWN OF RAMAPO PD NY 04353

DOMESTIC INCIDENT REPORT
(PRINT UPPER CASE)

06-36202

2/JAR

Date of Report Case 7-08-08-00404-SO Document 127 File 10/10/2008 Page 11 of 160

08/15/06 1826 08/14/06 2100

14 Madison Hill Rd, Suffern NY 10501

Compl./Victim's Last Name, First, M.I.

Address

Sex

Curley, Linda, J.

ABOVE

F

Date of Birth Age Home Telephone

07/23/68 38 368-8641

Race White Black Other
 Indian Asian UnknownEthnic Origin Hispanic Non-Hispanic Unknown

+

Suspect/Other Party Last Name, First, M.I.

Address

Sex

Curley, James, P.

ABOVE

M

Date of Birth Age Home Telephone

4/26/64 42 368-8641

Race White Black Other
 Indian Asian UnknownEthnic Origin Hispanic Non-Hispanic Unknown

+

Suspect Relationship to the Complainant/Victim

Suspect Present?

Offense/Incident Involved:

Description (Offenses)

HUSBAND

 YES NO Fel Misd Viol Other

Domestic Incident

Order of Protection? Violated?

Issuing Court

OP Registry Checked

Expir. Date

Complaint Report Prepared?

Compl. No.

Report Received

 YES NO YES NO YES NO

10/19/06

 YES NO Walk-in Radio Run

Suspect Used/Threatened Weapons? Type:

Victim Injured?

Describe

Aided No.

Removed to Hospital?

What Hospital?

 YES NO YES NO YES NO YES NO YES NO YES NO

Photos Taken?

Arrest Made?

Non Arrest Reason

 YES NO YES NO No Offense Committed Not at Scene Warrant Requested Other

If Arrest Made, Did Perp. Resist?

 YES NO

Charge(s) (List All)

NO CHARGES

Arrest No.

Family/Household Members Present? If YES, Last Name, First

 YES NO

Curley, James, T.

Date of Birth

8/2/05

Relationship

son

Curley, Courtney

4/07/02

daughter

Domestic Incident Report Receipt Issued? If NO, Reason:

 YES NO

Pending Supervisor's Review

DV Notice Issued to Victim

 YES NO

Date

08/15/06

Suspect's Actions: Biting Choking Destroying Property Forcible Restraint Grabbing Hair Pulling Homicide Injury to Child Kicking
 Pulling Phones From Wall Punching Pushing Pushing/Slamming Into Walls Sexual Abuse Slapping Threats With Weapon(s) Throwing Items
 Using Weapon(s) Verbal Abuse Other: Yelling, Physical contact w/hands (see Narrative & witness deposition)

Narrative of the Incident: (include results of investigation and basis for action taken)

- See Supplemental Report -

Victim's Statement of Allegations:

Last night approx. 9pm Jim told me my interior car light was on after I was locked in the bedroom/bathroom for the night. I went out + saw it was a trick ran back into the house and he was in the bedroom + when I went into the bathroom he tried to push me out. I said my stuff is in there + he yelled "Then get it out Linda." My daughter witnessed this and was very upset. I did not call 911 due to the last response.

False Statements made herein are punishable as a Class A Misdemeanor, pursuant to Section 210.45 of the Penal Law.

Victim's Signature

Date

8/15/06

Other involved Agency(s)

Linda Curley

Is There Reasonable Cause to Suspect A Child May Be The Victim of Abuse,

Any Guns in The House? YES NOAny Guns Seized? YES NONeglect or Maltreatment? YES NOHousehold Member Have a Pistol Permit? Yes NoPermit Seized? YES NO

If Yes, Reporting Officer Must Contact the NYS Child Abuse Hotline Registry # 1-800-635-1522.

Name _____

Issuing County _____

REFERRALS: Child Protective Services Licensing Bureau Adult Protective Services

Name of Person Notified:

 Domestic Violence Services Other Outside Agency

Date:

Time:

Notified By:

Reporting Officer's Signature (Include Rank)

Officer I.D. No.

Date

08/15/06

P. O. Mammucari

442

Supervisor's Signature (Include Rank)

Date

X. L. Lopez #323

1

Page
of
2
Pages

Town of Ramapo Police Department

SUPPLEMENTAL REPORTIncident
06-36202

Arrest

Report Date 08/15/2006	Report time 18:26	Complainant Linda J. Curley	Incident type Domestic
---------------------------	----------------------	--------------------------------	---------------------------

Narrative:

Above date and time, Linda Curley was in station lobby reporting a past domestic incident. Linda reports that last night at approximately 2100 hours she and her husband James had a verbal argument. Linda stated that she has locks on her bedroom and bathroom doors, and James tricked her so she would leave the bedroom. Linda stated that when she tried to get into the bathroom, James put his hands on her waist and pushed her away from him. Linda stated that she was not hurt and she didn't think that he was trying to hurt her, but she wanted a report because the incident upset her daughter Courtney. Linda stated that in the past, Courtney has witnessed James physically and verbally fight with Linda and this has made Courtney very anxious around James. Linda played an audio tape of the incident which I placed into evidence at the station. On the tape, I heard a female say that her stuff is in there, then I heard a male yell "then get it out", then I heard a child hysterically crying. Linda stated that the female voice was her, the male was her husband James, and the child is her daughter Courtney.

Linda gave a written deposition of the incident which is attached with this report. I advised Linda not to stay in the house if she felt unsafe. Linda advised me that she was in family court this week and the case had been adjourned until October. I advised Linda to go to Family Court tomorrow and request a stay away order of protection. Lt. Lampert was present during some of my conversations with Linda Curley. Lt. Lampert witnessed the deposition and advised me that she notified Lt. Gravina of the incident.

I spoke to James via telephone. James stated that there was an argument last night about who was staying in the bedroom. James stated that they had been alternating who got to stay in the larger room. James stated that Linda told him that her stuff was in the room, and he told her to get it out. James stated that his daughter Courtney became very upset and began to cry. James stated that at that point, both he and Linda stopped arguing so they could tend to Courtney to calm her down. James stated that at no time did he physically touch Linda. James further stated that he was in the bathroom and Linda came into the bathroom to get into the bedroom. James stated that Linda walked past him to the bedroom, and that it was more of a territorial argument over who got to stay in the master bedroom.

Both Linda and James stated that Courtney was very upset by the argument. Last week, I took a report from Linda that indicated there had been fighting in front of Courtney and that the child was anxious because of the arguing. Due to ongoing fighting and the audio tape of the child's reaction to witnessing the incident, I contacted CPS. I spoke to CPS worker Constance Weitzel, who took the case information and assigned it call #23781015. I completed a CPS report (form LDSS-22210A) and placed it in an addressed envelope in the outgoing mail bin (copy in file). I spoke to the on call C.P.S. worker, Sondra Hill and advised her of the incident.

P.O. M Sammarone
Reporting Officer Signature

442

Officer ID



323

Supv ID

TOWN OF RAMAPO POLICE DEPARTMENT

Case 7:08-cr-00404-SCR Document 12-7 Filed 10/10/2008 Page 13 of 50

Route 59
Suffern, N.Y.

Deposition of Witness Before Warrant

Serial # 06-36202

STATE OF NEW YORK

COUNTY OF RocklandVillage of AirmontLinda Curley, of the Village of Airmont,N.Y., age 38 years, occupation, Nursebeing produced before me, M. Sammarone, Police Officer
of the Town of Ramapo, in said County ofRockland as a witness on the accusatoryinstrument of —, of the —of —, N.Y., duly filed, being by me

duty sworn, deposes and says: Last night at approx. 9pm Jim told me my interior car light was on after I was locked in the bedroom/bathroom. I went out and saw it was a trick, ran back into the house and he was in the bedroom + when I went into the bathroom he put both hands around my waist, pushing be backward and then with his right hand he tried to close the door on me. I said My stuff is in there and he yelled =Then get it out, Linda".

NOTE: False statements made herein are punishable as a Class A Misdemeanor pursuant to
Section 210.45 of the Penal Law.

Sworn to before me this

15thday of August, 2006L. Lepant #323
(Signature)
Police Lt.

(Title)

Linda Curley

000163 p+1 / 41

**VOLUNTARY STATEMENT
(NOT UNDER ARREST)**

I, Linda Curley, am not under arrest for, nor am I being detained for any criminal offenses concerning the events I am about to make known to P.O. Sammarone #442. Without being accused of or questioned about any criminal offenses regarding the facts I am about to state, I volunteer the following information of my own free will, for whatever purposes it may serve.

I am 38 years of age, and I live at 14 Madison Hill Rd, Suffern, N.Y. 10580.

My daughter witnessed this and immediately started crying and was very upset. I did not call 911 due to the last response. He lied and told the police I threatened to kill him, so they said it was even.

Tonight at 5pm he followed me to the daycare and at 8pm he took my daughter from my sister in law Mary Curley, who was watching her for me at Suffern H.S. at a baseball game. He yelled at Mary to "stay away from my kids." The witnesses include a Suffern police officer and I need protection from this man and my children need protection and I am not getting it from anyone. He is going to kill me and then it will be too late to intervene.

NOTE: False statements made herein are punishable as a Class A Misdemeanor pursuant to Section 210.45 of the Penal Law.

I have read each page of this statement consisting of 3 page(s), each page of which bears my signature, and corrections, if any, bear my initials, and I certify that the facts contained herein are true and correct.

Dated at Pleasant, N.Y., this 15th day of August 2006.

WITNESS: D. L. Lopez #323

WITNESS: P.O. M. Sammarone #442

Linda Curley
Signature of person giving voluntary statement.
000164 8/21/06

**VOLUNTARY STATEMENT
(NOT UNDER ARREST)**

I, Linda Curley, am not under arrest for, nor am I being detained for any criminal offenses concerning the events I am about to make known to P.O. M. Sammarone #442. Without being accused of or questioned about any criminal offenses regarding the facts I am about to state, I volunteer the following information of my own free will, for whatever purposes it may serve.

I am 38 years of age, and I live at 14 Madison Hill Rd, Suffern NY 10901.

I was not injured during these events.

I was afraid that Jim would become out of control. When my daughter started crying - all of my attention turned to consoling her.

He was in the bedroom when I entered the bathroom. Then he entered the bathroom and pushed me towards the hallway/bathroom door.

NOTE: False statements made herein are punishable as a Class A Misdemeanor pursuant to Section 210.45 of the Penal Law.

I have read each page of this statement consisting of 3 page(s), each page of which bears my signature, and corrections, if any, bear my initials, and I certify that the facts contained herein are true and correct.

Dated at Almont, N.Y. this 15th day of August 2006.

WITNESS: S.T.C. Jr.

WITNESS: P.O. M. Sammarone #442

Linda Curley
Signature of person giving voluntary statement
000165#3A3

NEW YORK STATE
OFFICE OF CHILDREN AND FAMILY SERVICES
Case 7:08-cr-00404-SCR Document 12-7

8/15/06 Filed 10/10/2008 Page 16 of 50
Time AM/PM Local Case # 23781015
Local Dist/Agency 6:26 pm-36202 RAMAPO POLICE

REPORT OF SUSPECTED
CHILD ABUSE OR MALTREATMENT

SUBJECTS OF REPORT

Line #	Last Name	First Name	Aliases	Sex (M, F, Unk)	Birthday or Age Mo/Day/Yr	Ethnic Code	Relation Code	Role	Lang.
1.	Curley	Linda J.		F	7/23/68	W	WIFE	Mother Engl.	
2.	Curley	James P.		M	4/26/64	W	HUSB.	Father Engl	
3.	Curley	Courtney		F	4/7/02	W	Daughter	English	
4.	Curley	James T.		M	8/2/05	W	SON	-	ENGL.
5.									
6.									
7.									

MORE

List Addresses and Telephone Numbers (Using Line Numbers From Above)

1-4	14 Madison Hill Rd., SUFFERN NY 10901	HOME #	Telephone No. (845) 368-8641
1. ABOVE		CELL #	(845)-270-9765
2. ABOVE		CELL #	(845)-269-0348

BASIS OF SUSPICIONS

Alleged suspicions of abuse or maltreatment. Give child(ren)'s line number(s). If all children, write "ALL".

DOA/Fatality	Child's Drug/Alcohol Use	Swelling/Dislocation/Sprains
Fractures	Poisoning/Noxious Substances	Educational Neglect
Internal Injuries (i.e. Subdural Hematoma)	Choking/Twisting/Shaking	Emotional Neglect
Lacerations/Bruises/Welts	Lack of Medical Care	Inadequate Food/Clothing/Shelter
Burns/Scalding	Malnutrition/Failure to Thrive	Lack of Supervision
Excessive Corporal Punishment	Sexual Abuse	Abandonment
Inappropriate Isolation/Restraint(Institutional Abuse Only)	Inadequate Guardianship	Parent's Drug/Alcohol Misuse
Inappropriate Custodial Conduct(Institutional Abuse Only)	<input checked="" type="checkbox"/> Other specify MENTAL ARGUING & physical fighting in presence of CHILDREN	

State reasons for suspicion, including the nature and extent of each child's injuries, abuse or maltreatment, past and present, and any evidence or suspicions of "Parental" behavior contributing to the problem. Mother has given depositions alleging Father has fought verbally and physically in front of children, causing 4yr old to become upset. Mother says 4yr old is always on edge and becomes hysterical when parents fight. MOTHER PLAYED AUDIO TAPE OF INCIDENT FROM 8/14/06. The Mandated Reporter Requests Finding of Investigation YES NO that supports her claims.

(If known, give time/date of alleged incident)

MO 08

DAY 14

YR 06

CONFIDENTIAL	SOURCE(S) OF REPORT	CONFIDENTIAL	
NAME	TELEPHONE () -	NAME	TELEPHONE () -
ADDRESS		ADDRESS	
AGENCY/INSTITUTION		AGENCY/INSTITUTION	

RELATIONSHIP (✓ = REPORTER, X = SOURCE)

Med. Exam/Coroner Physician Hosp. Staff ✓ Law Enforcement Neighbor Relative Instl. Staff
 Social Services Public Health Mental Health School Staff Other Specify)

For Use By Physicians Only	Medical Diagnosis on Child X	Signature of Physician who examined/treated child X	Telephone No. () -
	Hospitalization Required:	<input type="checkbox"/> None <input type="checkbox"/> Under 1 week <input type="checkbox"/> 1-2 weeks <input type="checkbox"/> Over 2 weeks	

Actions Taken Or Medical Exam X-Ray Removal/Keeping Not. Med Exam/Coroner

About To Be Taken Photographs Hospitalization Returning Home Notified DA

Signature of Person Making This Report

P.O. M. Sammarone #442

Title	Date Submitted Mo. Day Yr.
Police OFFICER	08/15/06

000166

44

Town of Ramapo
 237 Route 59 Suffern, NY 10901
 phone: (845) 357-5100
 fax: (845) 357-8513

TOWN OF RAMAPO
 POLICE DEPARTMENT

NOV 16 P 12-46

APPLICATION FOR PUBLIC ACCESS TO TOWN RECORDS

Records Access Officer: Christian G. Sampson, Town Clerk
 TOWN RECORDS ARE OPEN FOR INSPECTION MONDAY - FRIDAY 9AM TO 5PM.

I HEREBY APPLY TO INSPECT THE FOLLOWING TOWN RECORD(S):
All reports made by Linda Curley to Ramapo Police Dept.

from July to present. Some dates include 8/9/06, 8/14/06, 8/24/06 & 11/23/06 + more

Linda Curley

(PRINT) Name of Person

Linda Curley

Signature

2006 NOV 16

14 Madison Hill Rd

Address

845-553-0760

Daytime Phone

16 NOV 2006

Suffern NY 10901

City/State/Zip

11/16/06

Date of Request

16 NOV 2006

Date Called _____ Comments _____

THERE IS A CHARGE OF \$.25 PER COPIED PAGE allowed by law.

FOR TOWN USE ONLY

- | | | |
|--|---|---------------------------------|
| <input type="checkbox"/> Request Approved | <input type="checkbox"/> No Charge for Record | <input type="checkbox"/> Charge |
|
 | | |
| () Request Denied for the Reason(s) Below: | | |
| <input type="checkbox"/> Confidential Disclosure | Certification Fee: () | |
| <input type="checkbox"/> Part of Investigatory Files | Photocopy Fee: () | |
| <input type="checkbox"/> Unwarranted Invasion of Personal Privacy | | |
| <input type="checkbox"/> Record Not Located | Total to be paid: () | |
| <input type="checkbox"/> Record Not Maintained by this Agency | | |
| <input type="checkbox"/> Would impair contract awards/collective bargaining agreements | | |
| <input type="checkbox"/> Trade secret, confidential commercial information | | |
| <input type="checkbox"/> Law enforcement records | | |
| <input type="checkbox"/> Exempted by Statute other than the Freedom of Information Act | | |
| <input type="checkbox"/> Other (Specify) _____ | | |

Signature of Town Rep.

Title

Date

NOTICE: Any person denied access to records may appeal the denial within 30 days of the denial. Such appeals should be addressed to the Supervisor of the Town of Ramapo, 237 Route 59, Suffern, NY 10901.

I HEREBY APPEAL:

Signature : _____

Date: _____

CTA 11-17-2006

000167 45

SECTION 1 CASE NO. DATE SUBMITTED OFFICER SHIELD RECORD #

SECTION 2: NATURE OF SUBMISSION:

PROPERTY IS: RECOVERED EVIDENCE OTHER: _____

USED IN CRIME? YES NO FELONY? YES NO

SECTION 3: PROPERTY DESCRIPTION

TAG #: _____ P CODE: 16 INV CODE: 12 SER #: _____

OWNER APPLIED #: _____ BRAND: _____ TYPE: _____

MODEL: _____ MISC DESC: Audio TAPE of Argument

BIKE CODE: _____

COR. ON. PU. / S.H. SIZE. VAT TIE.

***** SECTION 4: *****

CASE #: 2008-00036202
RADIOSHACK MICROCASSETTE

LOC/BIN: RTPD/ 45

Date Received: 08/29/2008

QUANTITY: _____



***** LOCATION: C

0011733

large: _____

Mo.	Day	Year	Time (24 hrs)	Address of Occurrence	APT #	Prepctn (NYC)	Aided # (NYC)	Complaint #						
11	10	00	09:30	114 Sutter, NY	10901	10901		6-50255						
How can we safely contact you? (e.g. Name, Phone)					<input type="checkbox"/> Officer-Initiated <input type="checkbox"/> Radio Run <input checked="" type="checkbox"/> Walk-In									
SAFETY CONTACT INFORMATION					Phone	DOB	Month	Day	Year	Age	Male			
Name (Last, First, M.I.) / (include aliases)					214-358-3581	10901	7	27	68	38	<input checked="" type="checkbox"/> Female			
Street & City					APT #	Zip	If non-English, language:							
Same as Above							<input type="checkbox"/> Spanish	<input type="checkbox"/> Chinese	<input type="checkbox"/> Other:					
Injured? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes					Removed to Hospital?	<input checked="" type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Asian <input type="checkbox"/> Hispanic	Notes (e.g. special needs, disability, requests):							
					<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes if yes, what hospital?	<input type="checkbox"/> Native American <input checked="" type="checkbox"/> Non-Hispanic								
Name (Last, First, M.I.) / (include aliases)					Phone	DOB	Month	Day	Year	Age	Male			
Curley, Linda					368-8641	10901	7	26	54	42	<input checked="" type="checkbox"/> Female			
Street & City					APT #	Zip	If non-English, language:							
Same as Above							<input type="checkbox"/> Spanish	<input type="checkbox"/> Chinese	<input type="checkbox"/> Other:					
Injured? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes					Removed to Hospital?	<input checked="" type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Asian <input type="checkbox"/> Hispanic	Prior DV History? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No							
					<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes if yes, what hospital?	<input type="checkbox"/> Native American <input checked="" type="checkbox"/> Non-Hispanic	Prior DV police report? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No							
Describe:					<input type="checkbox"/> Other:	<input type="checkbox"/> Unknown	Victim fearful? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No							
SUSPECT/P2 present?					LIVING SITUATION		RELATIONSHIP: (SUSPECT / P2 to VICTIM / P1)				Access to weapons? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					Do parties currently live together?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Married	<input checked="" type="checkbox"/> Formerly Married	Suspect: Drug/Alc History? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
<input checked="" type="checkbox"/> No					IF NO, have they lived together in the past?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Intimate Partner/Dating	<input type="checkbox"/> Former Intimate/Dating	Suspect: Hx suicide threat? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
					Do the parties have a child-in-common?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Child of victim/party 1	<input type="checkbox"/> Parent of victim/party 1	Suspect: Probation/Parole? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					
						<input type="checkbox"/> Relative:	<input type="checkbox"/> Other:							
1.	Name (Street / APT# / City, if needed)	Phone	DOB	Month	Day	Year	Relationship to victim / P1							
1.	Curley, Courtney	368-8641	10901	4	7	02	Daughter							
2.	Curley, James	368-8641	10901	8	2	05	Son							
3.														
(Check all that apply)					Offenses		Offenses Involved: (check all that apply)				Threat with weapon			
<input type="checkbox"/> Biting <input type="checkbox"/> Impaired Alcohol/Drugs <input type="checkbox"/> Pushing <input type="checkbox"/> Threw Items <input type="checkbox"/> Threats: (specify)							<input type="checkbox"/> Injure/Kill Persons				<input type="checkbox"/> Threat with weapon			
<input type="checkbox"/> Destroyed Property <input type="checkbox"/> Injury to Child <input type="checkbox"/> Sexual Assault <input type="checkbox"/> Unwanted Contact <input type="checkbox"/> Injure/Kill Self							<input type="checkbox"/> Injure/Kill Animal				<input type="checkbox"/> Weapons used: (specify)			
<input type="checkbox"/> (Estimated \$ _____) <input type="checkbox"/> Injury to Other Persons <input type="checkbox"/> Shooting <input type="checkbox"/> Verbal Abuse <input type="checkbox"/> Take Child							<input type="checkbox"/> Intimidation/Coercion <input type="checkbox"/> Violated Visitation/Custody Conditions <input type="checkbox"/> Destroy/Take Property				<input type="checkbox"/> Blunt Object			
<input type="checkbox"/> Forced Entry <input type="checkbox"/> Injury to Pet/Animal <input type="checkbox"/> Slapping <input type="checkbox"/> Stabbing <input type="checkbox"/> Other: N/A							<input type="checkbox"/> Intimidation/Coercion <input type="checkbox"/> OTHER Suspect Actions: <input type="checkbox"/> Other: N/A				<input type="checkbox"/> Gun			
<input type="checkbox"/> Forcible Restraint <input type="checkbox"/> Interference with Phone <input type="checkbox"/> Slamming Body <input type="checkbox"/> Strangulation/"Choking" <input type="checkbox"/> Sharp Instrument							<input type="checkbox"/> Hair Pulling <input type="checkbox"/> Kicking <input type="checkbox"/> Suicide or Attempt <input type="checkbox"/> Other: N/A				<input type="checkbox"/> Motor Vehicle			
<input type="checkbox"/> Homicide <input type="checkbox"/> Punching											<input type="checkbox"/> Other: N/A			
Arrest Made? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					Reasons arrest not made on-scene: <input type="checkbox"/> No Offense Committed <input checked="" type="checkbox"/> No Probable Cause <input checked="" type="checkbox"/> Suspect Off-Scene									
					<input type="checkbox"/> Warrant/Criminal Summons to be requested <input type="checkbox"/> Violation level: not in police presence (no citizen's arrest) <input type="checkbox"/> Other:									
Offenses					Law (e.g. PL)	Section (Sub)	Offenses Involved: (check all that apply)				OP Court Name: FAMILY			
1.	Criminal Contempt 2nd deg. PL	218.50(3)	<input type="checkbox"/> Felony None at this time											
2.			<input type="checkbox"/> Misdemeanor <input type="checkbox"/> Violation <input type="checkbox"/> Other (Specify)											
3.														
Photos Taken? IF YES, photos taken of:					<input type="checkbox"/> Victim Injuries <input type="checkbox"/> Suspect Injuries	Registry Checked? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Order of Protection? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Stay Away Order? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Order Violated? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Any PRIOR orders? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Expiration Date	Month	Day	Year
<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No					<input type="checkbox"/> Scene <input type="checkbox"/> Damaged Property <input type="checkbox"/> Other:									
Results of investigation and basis of action taken. (Were excited utterances, spontaneous admissions or spontaneous statements made? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (Complete 710.30 or other form when applicable). Linda Curley stopped by RPD Headquarters to report that her husband, James Curley, violated an order of protection. She stated that he was present in the home (above address) at 09:30 hrs. when she was there. She further stated that they share the house - he lives there from Fridays at 1200 hrs until Mondays at 1700 hrs, while she stays there from Mondays at 1700 hrs until Fridays at 1200 hrs. - and are not supposed to be there when it is the other's turn. Linda clarified by saying that, by James being at the house at 09:30 hrs. on Friday when it was her turn to be there, OTHER AGENCIES involved with the parties or incident (e.g. advocates, hospital, probation):														
Child Protective Services														
Is there reasonable cause to subject a child may be the victim of abuse, neglect, maltreatment or endangerment? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, officer must collect the NYS CHILD ABUSE HOTLINE REGISTRY # 1-800-635-1522					<input type="checkbox"/> Guns in House <input checked="" type="checkbox"/> Guns Seized <input type="checkbox"/> Has Permit <input type="checkbox"/> Permit Seized Issuing County: _____									
					Permit #(s): Prior to incident <input type="checkbox"/> Same permit(s)									
CONTACTS INITIATED BY POLICE: <input type="checkbox"/> Adult Protective Services <input type="checkbox"/> Child Protective Services (or ACS) <input type="checkbox"/> Domestic Violence Services <input type="checkbox"/> Firearms Licensing					<input type="checkbox"/> Who was notified? <input type="checkbox"/> Notified by (initial):									
<input type="checkbox"/> Mental Health <input type="checkbox"/> Parole <input type="checkbox"/> Probation <input type="checkbox"/> Rape Crisis <input type="checkbox"/> Other Agency: _____ Date: _____														
Officer's Signature (& Rank) (PRINT and SIGN) LD. Month Day Year					1. Was DIR given to the victim at the scene? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No									
Officer's Signature (& Rank) (PRINT and SIGN) LD. Month Day Year					2. Was Victim Rights Notice given to victim? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No									
					If NO, give reason: _____									
					Pending Supervisor Approval									

**Page 2 of the NYS Domestic Incident Report:
STATEMENT OF ALLEGATIONS / SUPPORTING DEPOSITION**

Suspect Name (Last, First, M.I.)

Curley, James

Linda Curley (victim/deponent name), state that on 11/10/06, (date) at Hill Road
 0, (nombre de victim/a/deponente), declaro que en tal fecha 11/10/06 en _____

Location of incident), in the County/City/Town/Village of _____, of the state of New York, the following did occur:
 donde el incidente ocurrio), el condado/ciudad/aldea/pueblo de _____, del estado de Nueva York, lo siguiente ocurrio:

This morning approx. 9:30 AM I was leaving my home with my two children Courtney and James to go to New City. Courtney had a 10:30 appt with the Social Worker Ann Gross which was ordered by the Law Guardian Chris Witholm. To my surprise two CPS caseworkers were at my door, Demetrius Travis and Rachel Elewitz. I had no knowledge that they were coming or that my estranged husband would be coming to the home. I invited the caseworkers in and met Ms. Elewitz for the first time. I explained that I had another appt. and was told that neither I nor the children needed to be there when I left with the children and returned after the appt. w/ Ann Gross, My estranged husband's truck was there still after 11 AM and the caseworkers were gone. I called the home and left a message on the answering machine asking Jimmy to leave, so I could finish getting my things packed and told him it was 11:27 AM. There was no response. I didn't call the police and didn't enter the home.

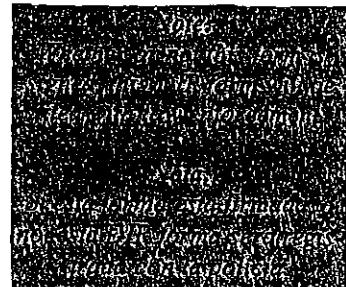
(Use additional pages as needed)

False Statements made herein are punishable as a Class A Misdemeanor, pursuant to section 210.45 of the Penal Law. Declaraciones falsas hechas aqui son castigables como una clase de delito menor, de acuerdo con la sección 210.45 de la y penal.

Linda Curley

Victim/Deponent Signature
Firma de victim/a/deponente

11/10/06

Date
Fecha

Interpreter

Date

P.O. J. Davis #463
Witness or Officer11/10/06
Date

1. Agency Ramapo	2. Division/Precinct Case 7:08-cr-00464-SGR Document 27	New York State SUPPLEMENTAL REPORT	Supplement 10/10/2008	3. Incident No. Page 21 of 50	4. Arrest No.
5. Date 11/10/06	6. Time of Report 14:49	7. Complainant Name Curley, Linda	8.	Domestic	
9. Narrative					

Just to clarify my statement:

After the caseworkers arrived, my estranged husband James Curley arrived and I was present when he was in the home.

Linda Curley
4/10/06

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10
11
12
13

Total

ADMINISTRATIVE	10. Inquiries (Check all that apply) <input type="checkbox"/> D&IV <input type="checkbox"/> Wart/Warrant <input type="checkbox"/> Bootleg <input type="checkbox"/> Crim. History <input type="checkbox"/> Stolen Property <input type="checkbox"/> Other	11. NYSPIN Message No.	12. Linda Curley	13. Reporting Officer Signature (Include Rank) 10/05/2006	14. ID No. 463	15. Supervisor's Signature (Include Rank)	16. ID No. 36	17. Case Status <input type="checkbox"/> Open <input type="checkbox"/> Closed (If Closed, check box below) <input type="checkbox"/> Unfounded <input type="checkbox"/> Vict. Refused to Coop. <input type="checkbox"/> Arrest <input type="checkbox"/> Pros. Declined <input type="checkbox"/> Warrant Advised <input type="checkbox"/> CBI <input type="checkbox"/> Juv. - No Custody <input type="checkbox"/> Arrest-Juv. <input type="checkbox"/> Offender Dead <input type="checkbox"/> Extrad. Decln. <input type="checkbox"/> Unknown	18. Status Date Mo Day Yr	19. Notified/TOT

1. Agency

Ramapo Case #08-cr-00404 SCR

2. Division/Precinct

New York State
SUPPLEMENTAL REPORTSupplement
10/10/2008

3. Incident No.

4. Arrest No.

5. Date

6. Time of Report

7. Complainant Name

8.

14 10 08

14:49

Curley, Linda

Page 22 of 50

9. Narrative

He violated the order of protection.

I attempted to reach James Curley by phone, but was unsuccessful; I did, however, leave him a voicemail requesting a call back. Attached is a copy of a modified order of protection, received from complainant. She stated that James' lawyer has been served w/ most up-to-date (modified) order, but that she doesn't know if James himself has been served.

1
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Total:

ADMINISTRATIVE

10. Inquiries (Check all that apply)

 DMV Warrant/Varrant
 Crim. History Stolen Property

 Bootleg
 Other

11. NYSPIN Message No.

12.

12.

Z

Page

of

Pages

13. Reporting Officer Signature (Include Rank)

PO [Signature]

14. ID No.

413

15. Supervisor's Signature (Include Rank)

[Signature]

16. ID No.

326

17. Case Status

 Open Closed (If Closed, check box below)

Unfounded

 Vict. Refused to Coop. Arrest Pros. Declined Warrant Advised CSI Juv. - No Custody Arrest-Juv. Offender Dead Extrad. Declin. Unknown

18. Status Date

Mo Day Year
11 10 08

19. Notified/TOT

A

use cover sheet

5. Date
11/12/066. Time of Report
10557. Complainant Name
Curley, Linda8.
Domestic

James Curley called me back to provide me with his account of incident from the other day. He stated that he was at the house when Linda Curley was there --he stated that this was at approximately 1000 hrs-- and that he was accompanied by two CPS case workers. He went on to say that Linda left the premises without meeting with him or the case workers because she had another meeting scheduled during the morning. James Curley went on to say that he then left the residence, and stopped over to #11 Madison Hill Rd to have a cup of coffee with the neighbor there until his custody exchange time at 1200 hrs. He added that he has been served with the most up-to-date order of protection advising that he is not supposed to be in the house when Linda is there. He advised that it is his understanding that he is just not supposed to be there alone with her, and is allowed to be in the house with her if there are CPS case workers ~~were~~ there. James Curley also added that Linda was in the house twice --once in September and once in early October-- when she wasn't supposed to be. He stated that he would look into the matter, and call me back with the exact dates and further information.

10. Inquiries (Check all that apply)
<input type="checkbox"/> DMV <input type="checkbox"/> Want/Warrant <input type="checkbox"/> Scofflaw
<input type="checkbox"/> Crim. History <input type="checkbox"/> Stolen Property <input type="checkbox"/> Other

11. NYSPIN Message No.

12.

82.

1

Page

1

of Pages

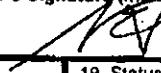
12. Reporting Officer Signature (Include Rank)

PO J. Quinn / 

14. ID No.

463

15. Supervisor's Signature (Include Rank)



16. ID No.

36

17. Case Status Open Closed (If closed, check box below)
 Vict. Refused to Coop Arrest Pros. Declined Warrant Advised
 CBI Juv. No Custody Offender Dead Extrad. Declin Unknown

18. Status Date

19. Notified/TOT

1. Agency Town of Ramapo Police	2. Division/Precinct 2/AB	3. Incident No. 106-50255	4. Arrest No.
Case 7:06-cr-00404-SCR		Document 12-7 Filed 10/19/2006	Page 24 of 50
5. Date 11/16/06	6. Time of Report 1605	7. Complainant Name Curley, Linda	8. Domestic

Today, I called and spoke with Rachel Elewitz, a CPS case worker, regarding the incident on 11/10/06. She stated that Demetrius Travis, a fellow CPS case worker, had contacted Linda Curley several times in an attempt to schedule a meeting, but was unsuccessful. Elewitz stated that Linda Curley never returned Travis' calls. Elewitz went on to say that Travis had also contacted James Curley, and that James Curley had returned his call and scheduled a meeting for 10:00 hrs. at 14 Madison Hill Road. Elewitz stated that she would be accompanying Travis to the meeting and that this would be her first time meeting either James or Linda Curley. She went on to say that Travis had been trying to arrange a meeting with either James or Linda Curley, and it turned out that only James returned his call. She stated that she did not know that Linda Curley would be at 14 Madison Hill Road.

Elewitz stated that she arrived at 14 Madison Hill Road at approximately 10:00 hrs., and waited in the driveway for a minute until Travis arrived. She stated that as they approached the house, Linda Curley came out from the garage --Elewitz stated that the garage bay door was already open-- with her two children at her side, and met them in the driveway. Elewitz stated that Linda Curley advised her that she was on her way out for another appointment, and that is why she was walking out of the garage. Elewitz stated that at this time, they all went inside the house. Elewitz stated that they had been inside the house for a few minutes explaining who they were and why they were there when James Curley arrived at the house. Elewitz advised that they were all present in the house for approximately 10-15 minutes, and that the atmosphere was cordial. Elewitz added that Linda Curley appeared "perturbed" that she and Travis were at the house unannounced because she (Linda Curley) had another appointment that she had to be at. Elewitz stated that Linda Curley left for her appointment after they all met for those 10-15 minutes, and that she (Elewitz), Travis, and James Curley remained in the house for a little while longer. Elewitz stated that Travis left a few minutes after Linda Curley because he had other appointments in the field; she advised that she stayed with James Curley in the house until 11:00 hrs. conducting an interview and touring the residence. She stated that she left at 11:00 hrs., but was unsure whether Curley remained or left.

I contacted Travis, but he was unavailable. I left a voice mail requesting a call back.

At 18:45 hrs., I contacted Linda Curley advising that a criminal information charging James Curley with Criminal Contempt 2nd Degree [Penal Law 215.50(3)] had been prepared. She advised that she would stop by RPD Headquarters to sign said criminal information. At approximately 19:30 hrs., Linda Curley arrived and signed said criminal information.

10. Inquiries (Check all that apply)	11. NYSPIN Message No.	12.	82. 1 Page
<input type="checkbox"/> DMV <input type="checkbox"/> Want /Warrant <input type="checkbox"/> Scofflaw <input type="checkbox"/> Crim. History <input type="checkbox"/> Stolen Property <input type="checkbox"/> Other			
12. Reporting Officer Signature (Include Rank) PO J. Quinn / <i>[Signature]</i>	14. ID No. 463	15. Supervisor's Signature (Include Rank) <i>[Signature]</i>	16. ID No. 326
17 Case Status <input type="checkbox"/> Open <input type="checkbox"/> Closed (If closed, check box below)	<input type="checkbox"/> Unfounded	19. Status Date	19. Notified/TOT
<input type="checkbox"/> Vict. Refused to Coop.	<input type="checkbox"/> Arrest	<input type="checkbox"/> Pros. Declined <input type="checkbox"/> Warrant Advised	
<input type="checkbox"/> CBI	<input type="checkbox"/> Offender Dead	<input type="checkbox"/> Extrad. Declin <input type="checkbox"/> Unknown	

Town of Ramapo Police Department

SUPPLEMENTAL REPORT

06-50255

Arrest

Report Date
11/16/2006Report time
18:45Complainant
Curley, LindaIncident type
Crim Contempt 2**Narrative:**

At appx. 1830 hrs, date, I called Mr. David Goldstein Esq., the attorney for James Curley 04/24/64. I informed him that charges for PL 215.50(3) were prepared and signed against his client. Mr. Goldstein and I agreed to a follow up phone conversation on 11/17/06 to arrange for the arraignment of the defendant.

Reporting Officer Signature

326

Officer ID

Supervisor's Signature

Supv ID

At a Term of the Family Court
of the State of New York held
in and for the County of Rockland
on October 26, 2006

PRESENT:

06-50255

HON: WILLIAM P. WARREN

ORDER
(SHORT FORM)

IN THE MATTER OF**LINDA CURLEY****PETITIONER****DOCKET NO: O-02187-06/06B****FAMILY UNIT NO: 23006****JAMES CURLEY****RESPONDENT**

This matter having been brought before the Court on the date of entry hereof, and
After examination and inquiry into the facts and circumstances of the case it is

ORDERED that James Curley shall not contact the children, Courtney Curley and
James Curley's daycare provider directly. If he needs information from the provider
he is to go through the Court.

ENTER



HON. WILLIAM P. WARREN

Dated: October 27, 2006
km

Pursuant to section 1113 of the Family Court Act, an appeal must be taken within thirty (30) days of receipt of the order by appellant in court, thirty-five(35) days from the mailing of the order to the appellant by the clerk of the court, or thirty (30) days after service by a party or law guardian upon the appellant, whichever is earliest.

06-50255

F.C.A. 430, 550, 655, 828, & 1029
ORI NO. NY043023J

At a term of the Family Court
of the State of New York,
County of Rockland at
1S. Main Street - Ste. 300
New City, New York on
October 26, 2006

P R E S E N T: HON. WILLIAM P. WARREN

In the Matter of a Proceeding under
Article 10 of the Family Court Act

COURTNEY CURLEY (DOB: 4/7/2002),
JAMES CURLEY (DOB: 8/2/2005),

A Child Under (18) Eighteen Years of Age
Alleged to be Neglected By:

MODIFIED
TEMPORARY
ORDER OF PROTECTION

DOCKET # NN-02775-06
NN-02776-06
FAMILY UNIT # 23006

JAMES CURLEY

RESPONDENT

NOTICE: YOUR WILLFUL FAILURE TO OBEY THIS ORDER MAY SUBJECT YOU
TO MANDATORY ARREST AND CRIMINAL PROSECUTION, WHICH MAY
RESULT IN YOUR INCARCERATION FOR UP TO FOUR YEARS FOR CONTEMPT,
AND/OR MAY SUBJECT YOU TO FAMILY COURT PROSECUTION AND
INCARCERATION FOR UP TO SIX MONTHS FOR CONTEMPT OF COURT.

A petition under Article 10 of the Family Court Act, sworn to on September 6, 2006, having been
filed in this court in the above entitled proceeding, and good cause having been shown,

Now, therefore, it is hereby ordered that James Curley observe the following conditions of
behavior:

[99] OTHER: James Curley shall drop off the children on Mondays at 5:00 PM at the Suffern
Police Station. Linda Curley shall pick up the children on Mondays at 5:00 PM
at the Suffern Police Station and remain in the home on Monday, Tuesday,
Wednesday and Thursday evenings;

Linda Curley not to be present in the home when James Curley is home;
James Curley not to be present in the home when Linda Curley is home;

Phone contact for each parent one (1) time a day at 9:00 PM when not with the children;

It is further ordered that this temporary order of protection shall remain in effect until further order of the Court.



HON. WILLIAM P. WARREN
JUDGE OF THE FAMILY COURT

DATED: October 27, 2006

km

Check if applicable:

Service executed DATE: TIME:

Party against whom order was issued received copy in court

The Family Court Act provides that presentation of a copy of this order of protection to any police officer or peace officer acting pursuant to his or her special duties shall authorize, and in some situations may require, such officer to arrest a person who has violated its terms and to bring him or her before the court to face whatever penalties may be imposed therefore.

Federal Law provides that this order must be honored and enforced by state and tribal courts, including courts of a state, the District of Columbia, a commonwealth, territory or possession of the United States, if it is established that the person against whom the order is sought has or will be afforded reasonable notice and opportunity to be heard in accordance with state law sufficient to protect the person's rights (18 U.S.C. 2265).

Pursuant to section 1113 of the Family Court Act, an appeal must be taken within thirty (30) days of receipt of the order by appellant in court, thirty-five (35) days from the mailing of the order to the appellant by the clerk of the court, or thirty (30) days after service by a party or law guardian upon the appellant, whichever is earliest.

PLEASE TAKE NOTICE
The within is a true copy of the
order entered in the office of
the Clerk of the Family Court of
the State of New York in the
County of Rockland.
Dated: 10/27/06
Clerk, W. Warren
Chief Clerk of the Court

Linda Curley not to be present in the home when James Curley is home;

James Curley not to be present in the home when Linda Curley is home;

Phone contact for each parent one (1) time a day at 9:00 PM when not with the children;

It is further ordered that this temporary order of protection shall remain in effect until further order of the Court.


HON. WILLIAM P. WARREN
JUDGE OF THE FAMILY COURT

DATED: October 27, 2006

km

Check if applicable:

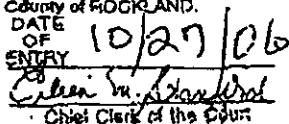
Service executed DATE: TIME:

Party against whom order was issued received copy in court

The Family Court Act provides that presentation of a copy of this order of protection to any police officer or peace officer acting pursuant to his or her special duties shall authorize, and in some situations may require, such officer to arrest a person who has violated its terms and to bring him or her before the court to face whatever penalties may be imposed therefore.

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Pursuant to section 1113 of the Family Court Act, an appeal must be taken within thirty (30) days of receipt of the order by appellant in court, thirty-five (35) days from the mailing of the order to the appellant by the clerk of the court, or thirty (30) days after service by a party or law guardian upon the appellant, whichever is earliest.

NOTICE OF ENTRY
PLEASE TAKE NOTICE that
the within is a true copy of the
order entered in the office of
the Clerk of the Family Court of
the State of New York in the
County of ROCKLAND.
DATE OF ENTRY 10/27/06

Clerk of the Court
Chief Clerk of the Court

06-50255

P.C.A. 430, 550, 655, 828, & 1029
ORI NO. NY043023J

At a term of the Family Court
of the State of New York,
County of Rockland at
1S. Main Street - Ste. 300
New City, New York on
October 26, 2006

P R E S E N T: HON. WILLIAM P. WARREN

MODIFIED
TEMPORARY
ORDER OF PROTECTION

In the Matter of a Proceeding under
Article 10 of the Family Court Act

COURTNEY CURLEY (DOB: 4/7/2002),
JAMES CURLEY (DOB: 8/2/2005)

A Child Under (18) Eighteen Years of Age
Alleged to be Neglected By:

DOCKET # NN-02773-06
NN-02774-06
FAMILY UNIT # 23006

LINDA CURLEY

RESPONDENT

NOTICE: YOUR WILLFUL FAILURE TO OBEY THIS ORDER MAY SUBJECT YOU
TO MANDATORY ARREST AND CRIMINAL PROSECUTION, WHICH MAY
RESULT IN YOUR INCARCERATION FOR UP TO FOUR YEARS FOR CONTEMPT,
AND/OR MAY SUBJECT YOU TO FAMILY COURT PROSECUTION AND
INCARCERATION FOR UP TO SIX MONTHS FOR CONTEMPT OF COURT.

A petition under Article 10 of the Family Court Act, sworn to on September 6, 2006, having been
filed in this court in the above entitled proceeding, and good cause having been shown,

Now, therefore, upon consent it is hereby ordered that Linda Curley observe the following
conditions of behavior:

[99] OTHER: Linda Curley shall drop off the children on Fridays at noon at the Suffern Police
Station. James Curley to pick up the children at the Suffern Police Station on
Fridays at noon and remain in the home on Friday, Saturday and Sunday
evenings;

Justice Court: Village of Airmont

County of Rockland

People of the State of New York
- against -
James Curley
of **14 Madison Hill Rd. Suffern, NY 10901**
Defendant

Case #: 06-50255

DOB: 04/24/1964

TYPE: MISDEMEANOR

Linda Curley

of 14 Madison Hill Rd., Suffern, NY 10901

being duly sworn, deposes and says as follows:

**On November 10, 2006 at about 09:30 hours, at 14 Madison Hill Rd. Suffern, NY 10584
in the Village of Airmont, County of Rockland, State of New York,
the defendant committed the offense(s) of:**

PL215.50(3) Criminal Contempt 2nd Degree

In that the defendant engaged in intentional disobedience to the lawful mandate of a court in other than a labor dispute.

The offense was committed under the following circumstances:

Deponent states that she observed the defendant disobey a Family Court Order of Protection by being present at 14 Madison Hill Rd. while she was there. Deponent provided Ramapo Police with a copy of Modified Temporary Order of Protection issued by Family Court (docket# NN-02773-06) dated 10/26/2006. Said Order directs, "James Curley [the defendant] not to be present in the home when Linda Curley [deponent] is home."

False statements made herein are punishable as a Class A Misdemeanor pursuant to section 210.45 of the Penal Law.

Rinda Culver

Deponent

11/16/06 7:20 pm
Date and Time

Affirmed before me this date:

(Signed)

000181 59

TOWN OF Ramapo
237 Route 59 Suffern, NY 10901
phone: (845) 357-5100
fax: (845) 357-8513

TOWN OF RAMAPO
POLICE DEPARTMENT

2006 NOV 16 P 12:46
APPLICATION FOR PUBLIC ACCESS TO TOWN RECORDS

Records Access Officer: Christian G. Sampson, Town Clerk.
TOWN RECORDS ARE OPEN FOR INSPECTION MONDAY - FRIDAY 9AM TO 5PM.

I HEREBY APPLY TO INSPECT THE FOLLOWING TOWN RECORD(S):
All reports made by Linda Curley to Ramapo Police Dept.

from July to present. Some dates include 3/9/06 5/14/06 8/24/06 & 11/2/06 + more

Linda Curley

(PRINT) Name of Person

Cham Clark

Signature

TO THE
TOWN OF
RAMAPO
POLICE
DEPARTMENT
2006 NOV 16 PM 12:46
P 12:46
33

14 Madison Hill Rd

Address

845-553-0760

Daytime Phone

Suffern NY 10901

City/State/Zip

11/16/06

Date of Request

Date Called _____ Comments _____

THERE IS A CHARGE OF \$.25 PER COPIED PAGE allowed by law.

FOR TOWN USE ONLY

- Request Approved No Charge for Record Charge
 Request Denied for the Reason(s) Below:
 Confidential Disclosure Certification Fee: (\$)
 Part of Investigatory Files Photocopy Fee: (\$)
 Unwarranted Invasion of Personal Privacy
 Record Not Located Total to be paid: (\$)
 Record Not Maintained by this Agency
 Would impair contract awards/collective bargaining agreements
 Trade secret, confidential commercial information
 Law enforcement records
 Exempted by Statute other than the Freedom of Information Act
 Other (Specify) _____

Signature of Town Rep.

Title

Date

NOTICE: Any person denied access to records may appeal the denial within 30 days of the denial. Such appeals should be addressed to the Supervisor of the Town of Ramapo, 237 Route 59, Suffern, NY 10901.

I HEREBY APPEAL:

Signature: _____ Date: _____

CTA 11-17-2006

000182

60

5. Date
11/17/066. Time of Report
16207. Complainant Name
Curley, Linda8.
Criminal Contempt

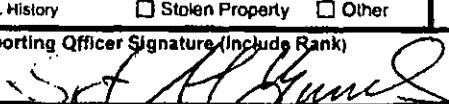
On the above date and time, Mr David Goldstein Esq., (cell # 914-588-7485) contacted me and confirmed that he will be surrendering his client James Curley to the Ramapo Justice Ct on 11/20/06 for arraignment on a charge of Criminal Contempt 2nd filed with the Airmont Justice Ct.

10. Inquiries (Check all that apply)		
<input type="checkbox"/> DMV	<input type="checkbox"/> Want /Warrant	<input type="checkbox"/> Scofflaw
<input type="checkbox"/> Crm. History	<input type="checkbox"/> Stolen Property	<input type="checkbox"/> Other

11. NYSPIN Message No.

12.

82.

12. Reporting Officer Signature (Include Rank)		
		

14. ID No.

326

15. Supervisor's Signature (Include Rank)

16. ID No.

Page

of Pages

17 Case Status <input type="checkbox"/> Open <input type="checkbox"/> Closed (If closed, check box below)			<input type="checkbox"/> Unfounded	19. Status Date	19. Notified/TOT
<input type="checkbox"/> Vict. Refused to Coop. <input type="checkbox"/> Arrest			<input type="checkbox"/> Pros. Declined <input type="checkbox"/> Warrant Advised		
<input type="checkbox"/> CBI <input type="checkbox"/> Juv.-No Custody <input type="checkbox"/> Offender Dead			<input type="checkbox"/> Extrad. Declin	<input type="checkbox"/> Unknown	

1. Agency Town of Ramapo Police	2. Division/Precinct Case #08-cr-00404-SCR	Document 12-7	Supplement 3. Incident No. Filed 10/10/2008 250255	4. Arrest No. Page 34 of 50
5. Date 1/25/08	6. Time of Report 1448	7. Complainant Name Curley,Linda	8.	

On Friday, January 25th, 2008 I responded to the Ramsey Police Department and secured a Town of Ramapo Police shield #168 and a police identification card from Detective Brian Huth. Det Huth reported that James Curley was arrested in possession of these items. A 1989 point blank bullet proof vest was also returned and it appears to be one issued to Curley in 1989. Property receipt signed by me and items placed into evidence room- hand delivered to PO Flynn.

10. Inquiries (Check all that apply) <input type="checkbox"/> DMV <input type="checkbox"/> Want /Warrant <input type="checkbox"/> Scofflaw <input type="checkbox"/> Crim. History <input type="checkbox"/> Stolen Propady <input type="checkbox"/> Other	11. NYSPIN Message No.	12.	82. Page
12. Reporting Officer Signature (Include Rank) D/sgt John Lynch	14. ID No. 328	15. Supervisor's Signature (Include Rank)	16. ID No. of Pages
17. Case Status <input type="checkbox"/> Open <input checked="" type="checkbox"/> Closed (If closed, check box below) <input type="checkbox"/> Vict. Refused to Coop. <input type="checkbox"/> Arrest <input type="checkbox"/> Unfounded <input type="checkbox"/> CBI <input type="checkbox"/> Juv.-No Custody <input type="checkbox"/> Offender Dead <input type="checkbox"/> Pros. Declined <input type="checkbox"/> Warrant Advised <input type="checkbox"/> <input type="checkbox"/> Extrad. Declin <input type="checkbox"/> Unknown	18. Status Date	19. Notified/TOT	



Personal Property Record

Page 1 of 1

Found Property

Finders Name Det. Brian Muto Finders Phone 201-327-2400
Address Ramsey P.D. City Ramsey State NJ
Owners Name RAMAPO POLICE Owners Phone 845-352-2400
Address 237 RT. 59 City SUFFREN State NY
Location Found POLICE HQ

Safe Keeping of Property

Reason For Safe Keeping

Surrender _____ Ambulance / 262-HELP Call _____ Prisoner _____ Other _____

Owners Name _____ Owners Phone _____

Address _____ City _____ State _____

Confiscated Property

Confiscated by _____ Shield# _____

Reason For Confiscation _____

Owners Name _____ Owners Phone _____

Address _____ City _____ State _____

Item #	Description Of Property	Property Location
1.	RAMAPO NEW YORK POLICE SHIELD #168	HQ.
2.	RAMAPO NEW YORK POLICE ID FOR JAMES CRAY	
3.	POINT BLANK POLICE ISSUE BULLET VEST	
	See # 38 ⁽⁶⁾ 10047063 (FRONT PANEL)	

Signature of Officer Det. Brian Muto Shield # 119 Date 1/25/2008

Owner/Agent Det./Sgt. John Lynch Officer Returning Det. Brian Muto Date 1/25/2008 63
000185

5. Date 2/5/08	6. Time of Report 9:38	7. Complainant Name Detective Lieutenant Weldel	8. Incident Type Warrant
--------------------------	----------------------------------	---	------------------------------------

James Curley turned himself in at police HQ on this warrant. He came in with his attorney Mr. John Edwards and his brother Michael. Adm. Lt. Gravina and I searched him and placed him in cell 1. He was processed and arraigned in Ramapo Justice Court by Judge Schoenberger. He was released on 15K bond that was posted in Ramapo Justice Court. He is due back in Airmont Court 2/21/08 at 5:00pm

10. Inquiries (Check all that apply)				11. NYSPIN Message No.	12. Complainant's Signature	20.
<input type="checkbox"/> DMV	<input checked="" type="checkbox"/> Want/Warrant	<input type="checkbox"/> Scotlaw				Page #
<input checked="" type="checkbox"/> Crim. History	<input type="checkbox"/> Stolen Property	<input type="checkbox"/> Other				1
13. Reporting Officer Signature (Include Rank) Det. Lt. Weidel				14. ID No. DLT	15. Supervisor's Signature (Include Rank)	16. ID No.
17 Case Status <input type="checkbox"/> Open <input checked="" type="checkbox"/> Closed* (if closed, check box below) <input type="checkbox"/> Vict. Refused to Coop. <input type="checkbox"/> Arrest <input type="checkbox"/> Unfounded <input type="checkbox"/> CBI <input type="checkbox"/> Juv.-No Custody <input type="checkbox"/> Offender Dead <input type="checkbox"/> Pros. Declined <input type="checkbox"/> Warrant Advised <input type="checkbox"/> <input type="checkbox"/> Extrad. Declin <input type="checkbox"/> Unknown				18. Status Date	19. Notified/TOT	Of 1 Page

PROPERTY RECEIPT

CASE NUMBER Ob-50255
DATE 2/5/08
TIME 940AM

PROPERTY LISTED:

1-NYS Drivers license # 319-469-651

*Nothing Else
Secured (PA)*

THE ABOVE LISTED PROPERTY HAS BEEN SECURED BY THE TOWN OF RAMAPO POLICE DEPARTMENT:

PROPERTY RECEIVED FROM:

NAME / SIGNATURE

Bob Weil - Det. J

DATE

OFFICER'S NAME / SIGNATURE

DET

DATE

2/5/08

**PROPERTY RETURNED TO

James Curley

I HAVE RECEIVED THE PROPERTY IDENTIFIED ABOVE

SIGNATURE

DATE

2/5/08

TIME

OFFICER'S SIGNATURE

SHIELD #

DATE

1205pm

2/5/08

**Provide Copies Of This Receipt To Property Owner
TORPD Form 37 (Rev. 12/97)



United States Attorney
Southern District of New York

United States District Courthouse
300 Quarropas Street
White Plains, New York 10601

July 8, 2008

BY HAND

The Honorable Stephen C. Robinson
United States District Judge
Southern District of New York
300 Quarropas Street
White Plains, NY 10601

Rc: United States v. James Curley,
08 Cr. 404 (SCR)

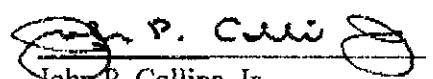
Dear Judge Robinson:

With the consent of defense counsel, the Government respectfully requests that the time from July 8, 2008 through July 24, 2008, the date of the rescheduled conference, be excluded from the speedy trial calendar based on a finding that the ends of justice served by the continuance outweigh the best interests of the public and the defendants in a speedy trial under 18 U.S.C. § 3161(h)(8)(A). The Government is currently responding to discovery requests made by the defendant.

Respectfully submitted,

MICHAEL J. GARCIA
United States Attorney

By:


John P. Collins, Jr.
Assistant United States Attorney
(914) 993-1919

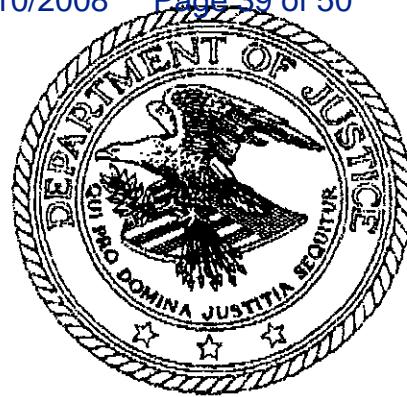
cc: Michael Burke, Esq. (by facsimile)

SO ORDERED:

Hon. Stephen C. Robinson
United States District Judge

000188

FAX
TRANSMISSION
U.S. ATTORNEY'S OFFICE, S.D.N.Y.
300 QUARROPAS STREET -- 3RD FLOOR
WHITE PLAINS, NEW YORK 10601



To: Michael Burke, Esq.

Office Phone No.: 845-357-7500

Fax Number: 845-357-7321

No. of pages (including cover sheet): 2

Date: July 8, 2008

"FOR OFFICIAL USE ONLY" U.S. ATTORNEY FACSIMILE COMMUNICATION

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From: John Collins, Jr.
Assistant U.S. Attorney

Office Phone No.: (914) 993-1919

Fax Numbers: (914) 993-1980; (914) 993-9036

Remarks:

000189



United States Attorney
Southern District of New York

United States District Courthouse
300 Quarropas Street
White Plains, New York 10601

July 3, 2008

BY FEDERAL EXPRESS

Michael Burke, Esq.
Burke, Miele & Golden
100 Washington Avenue
P.O. Box 397
Suffern, NY 10901

Re: United States v. James Curley,
08 Cr. 404 (SCR)

Dear Counsel:

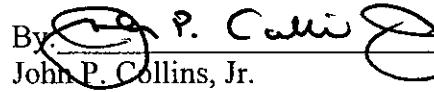
Pursuant to our continuing obligations under Fed. R. Crim. P. 16, I am enclosing:

- (1) July 13, 2006 Ramapo Police Department Reports (5 pages);
- (2) July 20, 2006 Ramapo Police Department Reports (1 page);
- (3) August 24, 2006 Ramapo Police Department Reports (23 pages);
- (4) Marriott Saddle Brook Receipts (2 pages);
- (5) One CD containing three recordings.

If you wish to inspect the originals of any of the documents listed above or the items listed in any of those documents, please let us know and we will make arrangements for you to do so.

Very truly yours,

MICHAEL J. GARCIA
United States Attorney
Southern District of New York

By: 
John P. Collins, Jr.
Assistant United States Attorney
(914) 993-1919

Enclosures

000190

7. Report Day TH	8. Report Time 7/13/06 930	9. Day	10. Date	11. Time	12. Supp.	13. Day	14. Date	15. Time
16. Incident Type Firearm Surrender			17. Business Name n/a			18. Weapon n/a		
19. Incident Address (Street No, Street Name, Bldg. No. Apt. No.) 14 MADISON HILL RD..			20. City, State, Zip (□ C □ T □ V) SUFFERN, NEW YORK 10901			21. Location Code 0		
1								23. No of Victims
2								24. No of Suspects
3								
PR	CURLEY, JAMES		4/26/84	14 MADISON HILL RD SUFFERN, NEW YORK 10901				368-8641 563-0760
								B H
								B H
								B H
								B H
								B H
27. Date of Birth		28. Age	29. Sex <input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> U <input type="checkbox"/> Unk	30. Race <input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Indian <input type="checkbox"/> Asian <input type="checkbox"/> Unk	31. Ethnic <input type="checkbox"/> Hispanic <input type="checkbox"/> Unk <input type="checkbox"/> Non-Hispanic	32. Handicap <input type="checkbox"/> Yes <input type="checkbox"/> No	33. Residence Status <input type="checkbox"/> Resident <input type="checkbox"/> Tourist <input type="checkbox"/> Student <input type="checkbox"/> Oth <input type="checkbox"/> Commuter <input type="checkbox"/> Military <input type="checkbox"/> Homeless <input type="checkbox"/> Unk	J
34. Type/No PI Table O	35. Name (Last, First, Middle)			36. Alias/NickName/Maiden Name (Last, First, Middle)			37. Apparent Condition <input type="checkbox"/> Impaired Drugs <input type="checkbox"/> Mental Dis. <input type="checkbox"/> Unk <input type="checkbox"/> Impaired Alco. <input type="checkbox"/> Inj / Ill <input type="checkbox"/> App Norm	K
38. Address (Street No., Street Name, Bldg No. Apt. No. City, State, Zip)					39. Phone No.		40. Social Security No.	L
41. Date of Birth		42. Age	43. Sex <input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> U	44. Race <input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Indian <input type="checkbox"/> Asian <input type="checkbox"/> Unk	45. Ethnic <input type="checkbox"/> Hispanic <input type="checkbox"/> Unk <input type="checkbox"/> Non-Hispanic	46. Skin <input type="checkbox"/> Light <input type="checkbox"/> Dark <input type="checkbox"/> Unk <input type="checkbox"/> Medium <input type="checkbox"/> Other	47. Occupation Table P	M
48. Height Ft In	49. Weight Table Q	50. Hair	51. Eyes Table H	52. Glasses <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Contacts	53. Build <input type="checkbox"/> Small <input type="checkbox"/> Large <input type="checkbox"/> Medium	54. Employer/School	55. Address	N
56. Scars / Marks/ Tattoos (Describe)					57. Misc.			
59. Veh. Status Table W	60. License Plate No. <input type="checkbox"/> Full <input type="checkbox"/> Partial		61. State	62. Exp Yr	63. Plate Type	64. Value		
65. Veh. Year	66. Make	67. Model	68. Style	69. VIN				
70. Color(s)		71. Towed By: To:			72. Vehicle Notes			
73. SEE ATTACHED SUPPLEMENTARY REPORT FOR DETAILS								
74. Inquiries (check all that apply) <input type="checkbox"/> DMV <input type="checkbox"/> Warrant / Warrant <input type="checkbox"/> Scofflaw <input type="checkbox"/> Criminal History <input type="checkbox"/> Stolen Property <input type="checkbox"/> Other			75. NYSPIN Message No.		76. Complainant Signature			
77. Reporting Officer Signature (Include Rank) 			78. ID No. 215	79. Supervisor's Signature (Include Rank)				80. ID No.
81. Status <input type="checkbox"/> Open <input type="checkbox"/> Closed (if closed, check box below) <input type="checkbox"/> Vict. Refused To Coop. <input type="checkbox"/> Arrest <input type="checkbox"/> Pros. Declined <input type="checkbox"/> Warrant Advised <input type="checkbox"/> CBI <input type="checkbox"/> Juv. No Custody <input type="checkbox"/> Arrest Juv <input type="checkbox"/> Offender Deed <input type="checkbox"/> Extrad. Declined <input type="checkbox"/> Unknown			82. Status Date		83. Notified / TOT			
84. Page # of Pages								

5. Date 7/13/06	6. Time of Report 930	7. Complainant Name Curley, James	8. Surrender of Firearm
--------------------	--------------------------	--------------------------------------	-------------------------

9:15am Received telephone call from P.O. James Curley stating that he needed to surrender his off-duty firearm to the Ramapo Police Department. P.O. Curley stated that he is going through a divorce and that his wife will be served with a temporary order of protection this morning.

P.O. Curley stated that he does not want to keep a firearm in the house as his wife may make false allegations against him after being served with the order of protection. I offered to meet with P.O. Curley at 12noon but he insisted that he needed to surrender the firearm immediately since his wife is scheduled to be served with the temporary order of protection this morning. P.O. Curley stated that he will turn over the firearm to me immediately.

9:30am P.O. Curley came into the police station and surrendered a Sig Sauer 9MM pistol serial number S174806 to me. I asked P.O. Curley if he owned or had any other weapons. P.O. Curley stated that he does not have or own any other weapons and that his department issued firearm was previously turned over to the police department several years ago.

I secured the weapon and advised Chief Dolan concerning this matter. P.O. Curley gave me a copy of the temporary order of protection for our records. Copy attached to this incident report.

10. Inquiries (Check all that apply) <input type="checkbox"/> DMV <input type="checkbox"/> Want/Warrant <input type="checkbox"/> Scofflaw <input type="checkbox"/> Crim. History <input type="checkbox"/> Stolen Property <input type="checkbox"/> Other	11. NYSPIN Message No.	12.	82. Page _____ of Pages _____
12. Reporting Officer Signature (Include Rank) 	14. ID No. 215	15. Supervisor's Signature (Include Rank) 	16. ID No. ____
17. Case Status <input type="checkbox"/> Open <input type="checkbox"/> Closed (If closed, check box below) <input type="checkbox"/> Vict. Refused to Coop. <input type="checkbox"/> Arrest <input type="checkbox"/> CSI <input type="checkbox"/> Juv.-No Custody <input type="checkbox"/> Offender Dead	<input type="checkbox"/> Unfounded <input type="checkbox"/> Pros. Declined <input type="checkbox"/> Warrant Advised <input type="checkbox"/> Extrad. Declin <input type="checkbox"/> Unknown	18. Status Date ____	19. Notified/TOT ____

F.C.A. §§ 430, 550, 655, 828, 1029

ORI No: NY043023J**Order No:** 2006-000525**NYSID No:** _____

At a term of the Family Court of the State of New York,
held in and for the County of Rockland, at 1 South Main
St. Suite 300 Floor 3, New City, NY 10956, on July 11,
2006

PRESENT: Honorable William P. Warren**In the Matter of a FAMILY OFFENSE Proceeding**

File # 23006

Docket# O-02066-06

**James Curley (DOB: 04/26/1964),
Petitioner,****- against -****Linda Curley (DOB: 07/23/1968),
Respondent.****Temporary Order Of Protection****Ex Parte**

NOTICE: YOUR FAILURE TO OBEY THIS ORDER MAY SUBJECT YOU TO MANDATORY ARREST AND CRIMINAL PROSECUTION, WHICH MAY RESULT IN YOUR INCARCERATION FOR UP TO SEVEN YEARS FOR CRIMINAL CONTEMPT, AND/OR MAY SUBJECT YOU TO FAMILY COURT PROSECUTION AND INCARCERATION FOR UP TO SIX MONTHS FOR CONTEMPT OF COURT. IF YOU FAIL TO APPEAR IN COURT WHEN YOU ARE REQUIRED TO DO SO, THIS ORDER MAY BE EXTENDED IN YOUR ABSENCE AND CONTINUE IN EFFECT UNTIL YOU APPEAR IN COURT.

A petition under Article 8 of the Family Court Act, having been filed on July 11, 2006 in this Court and good cause having been shown,

Now, therefore, it is hereby ordered that Linda Curley (DOB: 07/23/1968) observe the following conditions of behavior:

- [02] Refrain from assault, stalking, harassment, menacing, reckless endangerment, disorderly conduct, intimidation, threats or any criminal offense against James Curley (DOB: 04/26/1964);

000193

TOWN OF RAMAPO POLICE DEPARTMENT

237 Route 59
Suffern, NY 10901

PROPERTY RECEIPT

CASE NUMBER 06-30714DATE 7/13/06
TIME 0930

PROPERTY LISTED:

- (1) — 1 SIG SAUER 9mm Semi-Auto PISTOL
SERIAL # S174606
- (2) — 9 Rounds 9mm Ammos
- (3) — 1 Black LEATHER HOLSTER (Galco International)

THE ABOVE LISTED PROPERTY HAS BEEN SECURED BY THE TOWN OF RAMAPO POLICE DEPARTMENT.

PROPERTY RECEIVED FROM:

Jean C. G.

NAME/SIGNATURE

DATE

L.T.W. Gravitt Ed. Lt. #215

OFFICER'S NAME/SIGNATURE

215

7/13/06

SHIELD #

DATE

**PROPERTY RETURNED TO

I HAVE RECEIVED THE PROPERTY IDENTIFIED ABOVE

SIGNATURE

DATE

TIME

OFFICER'S SIGNATURE

SHIELD #

DATE

**Provide Copies Of This Receipt To Property Owner
TORPD Form 37 (Rev. 12/97)

000194

SECTION 1: 06-30714 7/13/06 GRAVINA 218
CASE NO. DATE SUBMITTED OFFICER SHIELD RECORD #

SECTION 2: NATURE OF SUBMISSION:

PROPERTY IS: RECOVERED EVIDENCE OTHER: S/K

USED IN CRIME? YES NO FELONY? YES NO

SECTION 3: PROPERTY DESCRIPTION

TAG #: 5174606 P CODE: INV CODE: SER #:

OWNER APPLIED #: CURLEY, JAMES BRAND: SIG SAUER TYPE: P230

MODEL: P230 MISC DESC: 9MM KURZ (380 AUTO)

BIKE CODE:

SECTION 4: I

QUANTITY: 1

LOCATION CODE

CASE #: 2006-00630714
SIG SAUER P230 380 AUTO
LOC/BIN: RTPD/ R2
Date Received: 07/13/2006


0011483

7. Report Day <u>TH</u>	8. Date <u>Mo 7 1 20 06</u>	9. Report Time <u>1130</u>	10. Day <u>-</u>	11. Date <u>Mo 7 1 20 06</u>	12. Time <u>8:45 AM</u>	13. Day <u>-</u>	14. Date <u>Mo 7 1 20 06</u>	15. Time <u>-</u>		
16. Incident Type <u>Suspicious</u>			17. Business Name <u>-</u>			18. Weapon(s) <u>A</u>				
19. Incident Address (Street No., Street Name, Bldg. No., Apt. No.) <u>14 Madison Hill Rd</u>			20. City, State, Zip (<input type="checkbox"/> C <input type="checkbox"/> T <input type="checkbox"/> V) <u>Airmont NY 10582</u>			21. Location Code <u>4456</u>				
1	2	3								
22. Description of Victim(s)										
1	2	3	4	5	6	7	8	9		
23. No. of Victims <u>1</u>										
24. No. of Suspects <u>4</u>										
25. Description of Suspect(s)										
1	2	3	4	5	6	7	8	9		
26. Victim also complainant <input type="checkbox"/> Y <input checked="" type="checkbox"/> N										
<u>PI WH CO 0 Curley James</u>			<u>4/26/04</u>	<u>14 Madison Hill Rd Airmont NY 10582</u>			<u>BUSINESS RESIDENCE</u>			
<u>CO McIntosh Robert P</u>			<u>v</u>	<u>237 RT59 Suffern NY 10501</u>			<u>BUSINESS RESIDENCE</u>			
<u>NI Holland Edward</u>			<u>8/27/00</u>	<u>57 Old Little Boston Rd Newburgh NY</u>			<u>BUSINESS RESIDENCE</u>			
27. Date of Birth Mo. <u>Day</u> <u>Yr.</u>			28. Age <u>20</u>	29. Sex <input checked="" type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> U	30. Race <input checked="" type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Indian <input type="checkbox"/> Asian <input type="checkbox"/> Unk.	31. Ethnic <input type="checkbox"/> Hispanic <input type="checkbox"/> Unk. <input checked="" type="checkbox"/> Non-Hispanic	32. Handicap <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	33. Residence Status <input type="checkbox"/> Temp. Res. - Foreign Nat. <input checked="" type="checkbox"/> Resident <input type="checkbox"/> Tourist <input type="checkbox"/> Student <input type="checkbox"/> Other <input type="checkbox"/> Commuter <input type="checkbox"/> Military <input type="checkbox"/> Homeless <input type="checkbox"/> Unk		
34. Type/No <u>TABLE O</u>			35. Name (Last, First, Middle)			36. Alias/Nickname/Maiden Name (Last, First, Middle)				
37. Apparent Condition <input type="checkbox"/> Impaired Drugs <input type="checkbox"/> Mental Dis. <input type="checkbox"/> Unk. <input type="checkbox"/> Impaired Alco. <input type="checkbox"/> Inj / Ill <input type="checkbox"/> App Norm			38. Address (Street No., Street Name, Bldg. No., Apt. No., City, State, Zip)						39. Phone No.	40. Social Security No.
41. Date of Birth Mo. <u>Day</u> <u>Yr.</u>			42. Age <u>20</u>	43. Sex <input type="checkbox"/> M <input checked="" type="checkbox"/> F <input type="checkbox"/> U	44. Race <input type="checkbox"/> White <input checked="" type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Indian <input type="checkbox"/> Asian <input type="checkbox"/> Unk.	45. Ethnic <input type="checkbox"/> Hispanic <input type="checkbox"/> Unk. <input type="checkbox"/> Non-Hispanic	46. Skin <input type="checkbox"/> Light <input type="checkbox"/> Dark <input type="checkbox"/> Unk. <input type="checkbox"/> Medium <input type="checkbox"/> Other	47. Occupation <u>TABLE P</u>		
48. Height ft. <u>5</u> in. <u>8</u>	49. Weight <u>188</u>	50. Hair <u>TABLE O</u>	51. Eyes <u>TABLE R</u>	52. Glasses <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Contacts <input type="checkbox"/> NO	53. Build <input type="checkbox"/> Small <input checked="" type="checkbox"/> Large <input type="checkbox"/> Medium	54. Employer/School	55. Address			
56. Scar/ Marks/Tattoos (Describe)					57. Misc.					
TABLE S		TABLE T		TABLE U		TABLE V				
58. Vehicle Status <u>TAB BW</u>	60. License Plate No <u>ARL2930</u>		Full <input checked="" type="checkbox"/> Partial <input type="checkbox"/>	61. State <u>NY</u>	62. Exp. Yr. <u>7/5/07</u>	63. Plate Type <u>YDSD</u>	64. Value <u>v</u>	Total		
65. Veh. Yr. <u>1988</u>	66. Make <u>Pontiac</u>	67. Model <u>Grand Prix</u>	68. Style <u>YDSD</u>	69. VIN. <u>1G2WP14W7JF264894</u>						
70. Color(s) <u>white</u>	71. Towed By: <u>-</u> To: <u>-</u>			72. Vehicle Notes <u>-</u>						
73. Undersigned responded to above location for an anonymous report of a suspicious car, occupied by a white male, parked in front of 14 Madison Hill Rd. Upon arrival undersigned spoke with Curley who stated the vehicle belonged to his friend, Holland, who was inside the house. The vehicle was unoccupied upon arrival. Curley was working in the garage with the garage door open.										
74. Inquiries (Check all that apply) <input type="checkbox"/> DMV <input type="checkbox"/> Want/Warrant <input type="checkbox"/> Scofflaw <input type="checkbox"/> Crim. History <input type="checkbox"/> Stolen Property <input type="checkbox"/> Other					75. NYSPIN Message No. <u>-</u>		76. Complainant Signature			
77. Reporting Officer Signature (Include Rank)					78. ID No. <u>462</u>	79. Supervisor's Signature (Include Rank) <u>Col. James C. Brinkley</u>			80. ID No. <u>212</u>	
81. Status <input type="checkbox"/> Open <input type="checkbox"/> Closed (If Closed, check box below) <input type="checkbox"/> Vict. Refused to Coop. <input type="checkbox"/> Arrest <input type="checkbox"/> Pros. Declined <input type="checkbox"/> Unfounded <input type="checkbox"/> CBI <input type="checkbox"/> Juv. -No Custody <input type="checkbox"/> Arrest - Juv. <input type="checkbox"/> Offender Dead <input type="checkbox"/> Warrant Advised <input type="checkbox"/> Offender Declin <input type="checkbox"/> Unknown					82. Status Date <u>Mo 7 10 06</u>	83. Notified/TOT <u>Mo 7 10 06</u>				

Agency TOWN OF ROME		ORI 09445200	New York State DOMESTIC INCIDENT REPORT (PRINT IN PAPER CASE)		SPRINT No. (NYPD) Filed 10/10/2008	Incident Report No. 26-27613	Pct. of Report	
Date of Report 8/24/06	Time of Report 9:34 AM	Date of Occur. 8/24/06	Time of Occur 9:34 AM	Address of Occurrence 161 MADISON HILL RD, Airmont, NY		Apt. No. 2	Sector 2	Beat +
Compl./Victim's Last Name, First, M.I. Curley Linda J			Address 14 Madison Hill RD, Airmont, NY			Sex F		
Date of Birth 7/23/68	Age 38	Home Telephone 845-368-8641	Race <input checked="" type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Indian <input type="checkbox"/> Asian <input type="checkbox"/> Unk	Ethnic Origin <input type="checkbox"/> Hispanic <input checked="" type="checkbox"/> Non-Hispanic <input type="checkbox"/> Unknown				
Suspect/Other Party Last Name, First, M.I. Curley James			Address 19 Madison Hill RD, Airmont, NY			Sex M		
Date of Birth 4/26/64	Age 42	Home Telephone 368-8641	Race <input checked="" type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Indian <input type="checkbox"/> Asian <input type="checkbox"/> Unk	Ethnic Origin <input type="checkbox"/> Hispanic <input checked="" type="checkbox"/> Non-Hispanic <input type="checkbox"/> Unknown				
Suspect Relationship to the Complainant/Victim Wife / Husband		Suspect Present? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Offense/Incident Involved: <input type="checkbox"/> Fel <input type="checkbox"/> Med <input checked="" type="checkbox"/> Viol <input type="checkbox"/> Other		Description (Offenses) HARASSMENT 2ND			
Order of Protection? YES	Violated? YES	Issuing Court +	OP Registry Checked YES	Expir. Date NO	Complaint Report Prepared? NO	Compl. No.	Report Received <input type="checkbox"/> Walk-in <input checked="" type="checkbox"/> Radio Run	
Suspect Used/Threatened Weapons? Type: +		Victim Injured? YES	Describe		Aided No.	Removed to Hospital? YES	What Hospital? NO	
Photos Taken? YES	Arrest Made? YES	Non Arrest Reason NO Offense Committed	<input type="checkbox"/> Not at Scene <input type="checkbox"/> Warrant Requested <input type="checkbox"/> Other		If Arrest Made, Did Perp. Resist? NO			
Charge(s) (List All) PL 240.26(1) HARASSMENT 2ND, CRIM. CONT 2ND				Arrest No. A-1476				
Family/Household Members Present? If YES, Last Name, First Courtney James			Date of Birth 4/9/02	Relationship Daughter	8/20/05	SON		
Domestic Incident Report Receipt Issued? If NO, Reason: Pending Approval			DV Notice Issued to Victim NO		Date			
Suspect's Actions: <input type="checkbox"/> Biting <input type="checkbox"/> Choking <input type="checkbox"/> Destroying Property <input type="checkbox"/> Forcible Restraint <input checked="" type="checkbox"/> Grabbing <input type="checkbox"/> Hair Pulling <input type="checkbox"/> Homicide <input type="checkbox"/> Injury to Child <input type="checkbox"/> Kicking <input type="checkbox"/> Pulling Phones From Wall <input type="checkbox"/> Punching <input type="checkbox"/> Pushing <input type="checkbox"/> Pushing/Slamming Into Walls <input type="checkbox"/> Sexual Abuse <input type="checkbox"/> Slapping <input type="checkbox"/> Threats With Weapon(s) <input type="checkbox"/> Throwing Items <input type="checkbox"/> Using Weapon(s) <input type="checkbox"/> Verbal Abuse <input type="checkbox"/> Other:								
Narrative of the Incident: (Include results of investigation and basis for action taken) Mrs. Courtney Curley was at the station with her 2 children to report she had a dispute at her house with her husband James. The dispute was over the children. She wanted to leave with them, but he said they had an important appointment this afternoon. As she went to her car, he grabbed her by the upper left arm and squeezed. She stated "Get your hands off me," to which he replied "I don't have my hands on you." Complainant left scene with the children and responded to the station.								
Victim's Statement of Allegations: This morning, I had my 2 children downstairs and began getting them dressed. My husband said they had to hurry because he was taking them to an important appointment. I got Courtney dressed quickly. About an hour later, they hadn't left so I asked Jimmy if he indeed had an apt. and if not I have the day off and planned on spending it with				Victim's Signature Sgt. Linda Curley		Date 8/24/06		
False Statements made herein are punishable as a Class A Misdemeanor, pursuant to Section 210.45 of the Penal Law.								
Other Involved Agency(s)								
Is There Reasonable Cause to Suspect A Child May Be The Victim of Abuse, Neglect or Maltreatment? NO				Any Guns In The House? NO		Any Guns Seized? NO		
If Yes, Reporting Officer Must Contact the NYS Child Abuse Hotline Registry # 1-800-635-1522.				Household Member Have a Pistol Permit? No		Permit Seized? NO		
REFERRALS: <input type="checkbox"/> Child Protective Services <input type="checkbox"/> Licensing Bureau <input type="checkbox"/> Adult Protective Services <input type="checkbox"/> Name of Person Notified: <input type="checkbox"/> Domestic Violence Services <input type="checkbox"/> Other Outside Agency				Date:		Time:		
Reporting Officer's Signature (Include Rank) Sgt. Linda Curley				Officer I.D. No. 315		Date 8/24/06		
Supervisor's Signature (Include Rank)				Date		Page of 1		

Date of Report 7/24/06	Time of Report 1036	Date of Occur 8/24/06	Time of Occur 0930	Address of Occurrence 14 Madison Hill Road Monsey NY 10952	Apt. No.	Sector	Beat
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Compl./Victim's Last Name, First, M.I. Curley, James, Peter					Address 14 Madison Hill Road Monsey NY 10952	Sex M
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Date of Birth 4/26/64	Age 42	Home Telephone 845 368 8641	Race <input checked="" type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Indian <input type="checkbox"/> Asian <input type="checkbox"/> Unk	Ethnic Origin <input type="checkbox"/> Hispanic <input checked="" type="checkbox"/> Non-Hispanic <input type="checkbox"/> Unknown
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Suspect/Other Party Last Name, First, M.I. Curley, Linda			Address 14 Madison Hill Road Monsey NY 10952	Sex F
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Date of Birth 7/23/68	Age 38	Home Telephone 845 368 8641	Race <input checked="" type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Indian <input type="checkbox"/> Asian <input type="checkbox"/> Unk	Ethnic Origin <input type="checkbox"/> Hispanic <input checked="" type="checkbox"/> Non-Hispanic <input type="checkbox"/> Unknown
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Suspect Relationship to the Complainant/Victim Wife		Suspect Present? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Offense/Incident Involved: <input type="checkbox"/> Fel <input type="checkbox"/> Mid <input type="checkbox"/> Viol <input checked="" type="checkbox"/> Other	Description (Offenses) Domestic
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Order of Protection? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Violated? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Issuing Court RC Family Court	OP Registry Checked <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Expir. Date 10/19/06	Complaint Report Prepared? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Compl. No.	Report Received <input type="checkbox"/> Walk-in <input type="checkbox"/> Radio Run
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Suspect Used/Threatened Weapons? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Type: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Victim Injured? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Describe	Aided No.	Removed to Hospital? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	What Hospital?
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Photos Taken? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Arrest Made? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Non Arrest Reason <input checked="" type="checkbox"/> No Offense Committed <input type="checkbox"/> Not at Scene <input type="checkbox"/> Warrant Requested <input type="checkbox"/> Other	If Arrest Made, Did Perp. Resist? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
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Charge(s) (List All)	Arrest No.
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Family/Household Members Present? If YES, Last Name, First <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO James Thomas Curley	Date of Birth 8/2/05	Relationship Son
Courtney Lynn Curley	4/2/02	Daughter

Domestic Incident Report Receipt Issued? If NO, Reason: <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO DV Notice Issued to Victim <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Date

Suspect's Actions: <input type="checkbox"/> Biting <input type="checkbox"/> Choking <input type="checkbox"/> Destroying Property <input type="checkbox"/> Forceable Restraint <input type="checkbox"/> Grabbing <input type="checkbox"/> Hair Pulling <input type="checkbox"/> Homicide <input type="checkbox"/> Injury to Child <input type="checkbox"/> Kicking <input type="checkbox"/> Pulling Phones From Wall <input type="checkbox"/> Punching <input type="checkbox"/> Pushing <input type="checkbox"/> Pushing/Slamming Into Walls <input type="checkbox"/> Sexual Abuse <input type="checkbox"/> Slapping <input type="checkbox"/> Threats With Weapon(s) <input type="checkbox"/> Throwing Items <input type="checkbox"/> Using Weapon(s) <input checked="" type="checkbox"/> Verbal Abuse <input type="checkbox"/> Other:

Narrative of the incident: (Include results of investigation and basis for action taken)

See Supplemental

Victim's Statement of Allegations: At Approx. 9:30 AM I was at home with my children & wife, when my wife demanded the children. I told her we had appointments, we were going to the YMCA in Wyckoff and then to the Dentist Dr. Peters in Monsey. My wife was carrying the baby & a cotillion when she started screaming stop bashing me. I never went near her, and then walked outside carrying Courtney - my wife

False Statements made herein are punishable as a Class A Misdemeanor, pursuant to Section 210.45 of the Penal Law.

Victim's Signature *James C. Curley* Date 8/24/06

Other involved Agency(s)

Is There Reasonable Cause to Suspect A Child May Be The Victim of Abuse, Neglect or Maltreatment? YES NO Any Guns In The House? YES NO Any Guns Seized? YES NO Household Member Have a Pistol Permit? Yes No Permit Seized? YES NO Permit No. _____ Issuing County _____

If Yes, Reporting Officer Must Contact the NYS Child Abuse Hotline Registry # 1-800-635-1522 Name _____

REFERRALS: Child Protective Services Licensing Bureau Adult Protective Services Name of Person Notified:
 Domestic Violence Services Other Outside Agency Date: Time: Notified By:

Reporting Officer's Signature (Include Rank) *Po* Officer I.D. No. 475 Date _____

Supervisor's Signature (Include Rank) *Col. M. J. O'Boyle* Date 08/24/06

Agency ORI New York State DOMESTIC INCIDENT REPORT (PRINT UPPER CASE) SPRINT No. (NYPD) Incident Report No. Pct. of Report

Page 708-cr-00404 SCR3 Document Filed 10/10/2008 Page 43 of 53 Date of Report Time of Report Date of Occur Time of Occur Address of Occurrence Apt. No. Sector Beat

8/24/06 1036 8/24/06 0930 14 Madison Hill Rd, Maysville, NY 10552 2 2 Beat

Compl./Victim's Last Name, First, M.I. Address Sex

Date of Birth Age Home Telephone Race White Black Other Indian Asian Unk Ethnic Origin Hispanic Non-Hispanic Unknown

Suspect/Other Party Last Name, First, M.I. Address Sex

Date of Birth Age Home Telephone Race White Black Other Indian Asian Unk Ethnic Origin Hispanic Non-Hispanic Unknown

Suspect Relationship to the Complainant/Victim Suspect Present? Offense/Incident Involved: Description (Offenses)

YES NO Fel Med Viol Other

Order of Protection? Violated? Issuing Court OP Registry Checked Expir. Date Complaint Report Prepared? Compl. No. Report Received

YES NO YES NO YES NO YES NO Walk-in Radio Run

Suspect Used/Threatened Weapons? Type: Victim Injured? Describe Aided No. Removed to Hospital? What Hospital?

YES NO YES NO YES NO YES NO YES NO

Photos Taken? Arrest Made? Non Arrest Reason If Arrest Made, Did Perp. Resist?

YES NO YES NO No Offense Committed Not at Scene Warrant Requested Other YES NO

Charge(s) (List All) Arrest No.

Family/Household Members Present? If YES, Last Name, First Date of Birth Relationship

YES NO

Domestic Incident Report Receipt Issued? If NO, Reason: DV Notice Issued to Victim Date

YES NO YES NO

Suspect's Actions: Biting Choking Destroying Property Forcible Restraint Grabbing Hair Pulling Homicide Injury to Child Kicking
 Pulling Phones From Wall Punching Pushing Pushing/Slamming Into Walls Sexual Abuse Slapping Threats With Weapon(s) Throwing Items
 Using Weapon(s) Verbal Abuse Other:

Narrative of the Incident: (Include results of investigation and basis for action taken)

See Supplemental

Victim's Statement of Allegations:

Come towards me put her hand on my shoulder. I told her to get her hand off me, stop touching me. I was backing away which was observed by my neighbor Betty Vanderbeek. I ran for Courtney down and let her go to Dr. I asked my wife to have her back by 1pm for her appointment.

False Statements made herein are punishable as a Class A Misdemeanor, pursuant to Section 210.45 of the Penal Law. Victim's Signature Date 8/27/06

Other involved Agency(s)

Is There Reasonable Cause to Suspect A Child May Be The Victim of Abuse, Any Guns in The House? YES NO Any Guns Seized? YES NO
 Neglect or Maltreatment? YES NO Household Member Have a Pistol Permit? Yes No Permit Seized? YES NO

If Yes, Reporting Officer Must Contact the NYS Child Abuse Hotline Registry # 1-800-835-1522. Permit No. _____ Issuing County _____ Name _____

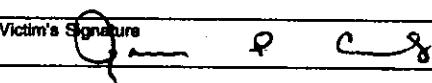
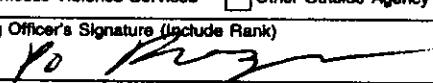
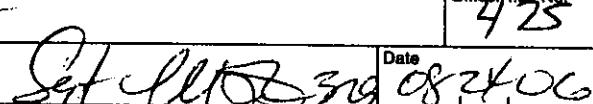
REFERRALS: Child Protective Services Licensing Bureau Adult Protective Services Name of Person Notified:
 Domestic Violence Services Other Outside Agency Date: Time: Notified By:

Reporting Officer's Signature (Include Rank) Officer I.D. No. 475 Date

Supervisor's Signature (Include Rank) Date 8/27/06

White Copy - Agency Pink Copy - Victim Date 8/27/06

Canary Copy - DCIS Goldenrod Copy - Victim Date 8/27/06

Agency FBI	ORI NY	New York State DOMESTIC INCIDENT REPORT (PRINT UPPER CASE)	SPRINT No. (NYPD)	Incident Report No. Page 50 of 50	Pct. of Report			
Date of Report 8/24/06	Time of Report 1036	Date of Occur 8/24/06	Time of Occur 0930	Address of Occurrence 14 Madison Hill Road Monsey NY 1052	Apt. No.	Sector	Beat	
Complainant's Last Name, First, M.I. Curley, James, Peter				Address 14 Madison Hill Road Monsey NY 1052				Sex M
Date of Birth	Age	Home Telephone		Race <input checked="" type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Indian <input type="checkbox"/> Asian <input type="checkbox"/> Unk	Ethnic Origin <input type="checkbox"/> Hispanic <input checked="" type="checkbox"/> Non-Hispanic <input type="checkbox"/> Unknown			
Suspect/Other Party Last Name, First, M.I. Curley, Linda				Address 14 Madison Hill Road Monsey NY 1052				Sex M
Date of Birth	Age	Home Telephone		Race <input type="checkbox"/> White <input type="checkbox"/> Black <input type="checkbox"/> Other <input type="checkbox"/> Indian <input type="checkbox"/> Asian <input type="checkbox"/> Unk	Ethnic Origin <input type="checkbox"/> Hispanic <input type="checkbox"/> Non-Hispanic <input type="checkbox"/> Unknown			
Suspect Relationship to the Complainant/Victim		Suspect Present? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Offense/Incident Involved: <input type="checkbox"/> Fel <input type="checkbox"/> Mid <input type="checkbox"/> Viol <input type="checkbox"/> Other		Description (Offenses)			
Order of Protection? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Violated? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Issuing Court	OP Registry Checked <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Expir. Date	Complaint Report Prepared? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Compl. No.	Report Received <input type="checkbox"/> Walk-In <input type="checkbox"/> Radio Run	
Suspect Used/Threatened Weapons? Type: <input type="checkbox"/> YES <input type="checkbox"/> NO		Victim Injured? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Describe		Aided No.	Removed to Hospital? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	What Hospital?	
Photos Taken? <input type="checkbox"/> YES <input type="checkbox"/> NO	Arrest Made? <input type="checkbox"/> YES <input type="checkbox"/> NO	Non Arrest Reason <input type="checkbox"/> No Offense Committed <input type="checkbox"/> Not at Scene <input type="checkbox"/> Warrant Requested <input type="checkbox"/> Other				If Arrest Made, Did Perp. Resist? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
Charge(s) (List All)				Arrest No.				
Family/Household Members Present? If YES, Last Name, First <input type="checkbox"/> YES <input type="checkbox"/> NO				Date of Birth	Relationship			
Domestic Incident Report Receipt Issued? If NO, Reason: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				DV Notice Issued to Victim <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Date			
Suspect's Actions: <input type="checkbox"/> Biting <input type="checkbox"/> Choking <input type="checkbox"/> Destroying Property <input type="checkbox"/> Forcible Restraint <input type="checkbox"/> Grabbing <input type="checkbox"/> Hair Pulling <input type="checkbox"/> Homicide <input type="checkbox"/> Injury to Child <input type="checkbox"/> Kicking <input type="checkbox"/> Pulling Phones From Wall <input type="checkbox"/> Punching <input type="checkbox"/> Pushing <input type="checkbox"/> Pushing/Slamming Into Walls <input type="checkbox"/> Sexual Abuse <input type="checkbox"/> Slapping <input type="checkbox"/> Threats With Weapon(s) <input type="checkbox"/> Throwing Items <input type="checkbox"/> Using Weapon(s) <input type="checkbox"/> Verbal Abuse <input type="checkbox"/> Other:								
Narrative of the Incident: (Include results of investigation and basis for action taken) See Supplemental Report								
Victim's Statement of Allegations: I went to wave goodbye to the children at the side of the car when my wife pulled the vehicle up and driven back the vehicle towards me, causing me to fall back towards the wooden rails that border the grass.								
False Statements made herein are punishable as a Class A Misdemeanor, pursuant to Section 210.45 of the Penal Law.				Victim's Signature 		Date 8/24/06		
Other Involved Agency(s)								
Is There Reasonable Cause to Suspect A Child May Be The Victim of Abuse, Neglect or Maltreatment? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				Any Guns In the House? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		Any Guns Seized? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
If Yes, Reporting Officer Must Contact the NYS Child Abuse Hotline Registry # 1-800-635-1522				Household Member Have a Pistol Permit? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Permit Seized? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		
REFERRALS: <input type="checkbox"/> Child Protective Services <input type="checkbox"/> Licensing Bureau <input type="checkbox"/> Adult Protective Services				Name of Person Notified: <input type="checkbox"/> Domestic Violence Services <input type="checkbox"/> Other Outside Agency				
Reporting Officer's Signature (Include Rank) 				Date: 8/24/06	Time: 4:25	Notified By: Officer I.D. No. 3		
Supervisor's Signature (Include Rank) 				Date 8/24/06			Page of 3 Pages	
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